10/19/2007 10:21

Image# 27990839717

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

| _ | | | | | Office U | se Only |
|----------------|--|--|-----------------------|--------------------------------|-----------------------------|---|
| 1. | NAME OF COMMITTEE (in full) | USE FEC MAILING LA OR TYPE OR PRINT | Lampi | e:If typing, type | • • • • • | |
| Ш | National Association of Insu | | sors Political Action | Commit- | | |
| Ш | | 1 1 1 1 1 1 | <u> </u> | | 1 1 1 1 1 1 | |
| AD | DRESS (number and street) | 2901 Telestar Court | | | | |
| | Check if different than previously reported. (ACC) | Falls Church | | | VA 2 | 22042 |
| 2. | FEC IDENTIFICATION NU | MBER ₩ | CITY 🛕 | STA | ATE A | ZIPCODE A |
| | C00005249 | | 3. IS THIS REPORT | X NEW (N) OR | AMENDED (A) | |
| 4. | TYPE OF REPORT (Choose One) | (b) Monthly Report Due On: | Feb 20 (M2) | May 20 (M5) | Aug 20 (M8) | Nov 20 (M11) (Non-Election Year Only) |
| | (a) Quarterly Reports: | Due On. | Mar 20 (M3) | Jun 20 (M6) | Sep 20 (M9) | Dec 20 (M12) (Non-Election Year Only) |
| | April 15 Quarterly Report(0 | Q1) (c) 12-Day | Apr 20 (M4) | Jul 20 (M7) mary (12P) | Oct 20 (M10) General (12G) | Jan 31 (YE) Runoff (12R) |
| | July 15 Quarterly Report(0 | DDE Elect | tion | nvention (12C) | Special (12G) | |
| | Quarterly Report(0 January 31 Quarterly Report(1) | ′ | Election on | | | in the State of |
| | July 31 Mid-Year Report(Non-electi Year Only) (MY) | on (d) 30-Day Post -Ele | ction Ge | neral (30G) | Runoff (30R) | Special (30S) |
| | Termination Repo | Report for | the: | | | in the |
| 5. | Covering Period 0 | 9 01 20 | Election on 0 7 | through 0 9 | 30 2007 | State of |
| Lce | ertify that I have examined this | Report and to the best of | my knowledge and | belief it is true, correct and | l complete | |
| | e or Print Name of Treasurer | Peter C. Browne | | | | |
| Sig | nature of Treasurer Ele <u>ctr</u> | onically Filed by Peter (| C. Browne | Date | 10 1 | 9 2007 |
| NO | TE : Submission of false, erro | oneous, or incomplete info | ormation may subjec | t the person signing this R | eport to the penalties | s of 2 U.S.C 437g. |
| | Office Use Only | | | | l l | C FORM 3X ev. 02/2003) |

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name National Association of Insurance and Financial Advisors Political Action Commit-[®] D " D 0.9 0 1 2007 0.9 3 0 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand [°]2007 138478.22 January 1 (b) Cash on Hand at 190806.74 Begining of Reporting Period 105460.67 757178.54 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 296267.41 895656.76 6(a) and 6(c) for Column B) 69580.59 668969.94 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 226686.82 226686.82 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 73770.12 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

> Federal Election Commission 999 E street, NW Washington, DC 20463

> > Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

National Association of Insurance and Financial Advisors Political Action Commit-

tee

Report Covering the Period:

From:

м м 0 9 01

^Y 2 0 0 7

To:

0 9

^D 3 0

2007

| | I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|----------|--|-------------------------------|-----------------------------------|
| 11. | Contributions (other than loans) From: (a) Individuals/Persons Other | | |
| | Than Political Committees (i) Itemized (use Schedule A) | 46174.60 | 234590.94 |
| | (ii) Unitemized | 59286.07 | 522587.60 |
| | (iii) TOTAL (add Lines 11(a)(i) and (ii) | 105460.67 | 757178.54 |
| | (b) Political Party Committees | 0.00 | 0.00 |
| | (c) Other Political Committees (such as PACs) | 0.00 | 0.00 |
| | 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 105460.67 | 757178.54 |
| 2. | Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 |
| 3. | All Loans Received | 0.00 | 0.00 |
| 4. 5. | Loan Repayments Received Offsets To Operating Expenditures | 0.00 | 0.00 |
| | (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) | 0.00 | 0.00 |
| Ο. | to Federal candidates and Other Political Committees | 0.00 | 0.00 |
| 7. | Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 |
| 8. | | | |
| | (a) Non-Federal Account (from Schedule H3) | 0.00 | 0.00 |
| | (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| | (c) Total Transfer (add 18(a) and 18(b)). | 0.00 | 0.00 |
| 9. | Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) | 105460.67 | 757178.54 |
| 20. | Total Federal Receipts (subtract Line 18(c) from Line 19) | 105460.67 | 757178.54 |

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

| | II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|----|---|-------------------------------|-----------------------------------|
| 1. | Operating Expenditures: (a) Shared Federal/Non-Federal | | |
| | Activity (from Schedule H4) | 0.00 | 0.00 |
| | (i) Federal Share | 0.00 | 0.00 |
| | (ii) Non-Federal Share | 0.00 | 0.00 |
| | (b) Other Federal Operating | | |
| | Expenditures | 580.59 | 110787.44 |
| | (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) | 580.59 | 110787.44 |
| 2. | Transfers to Affiliated/Other Party | | |
| _ | Committees | 0.00 | 0.00 |
| | Contributions to Federal Candidates/Committeesand Other Political Committees | 69000.00 | 555500.00 |
| | Independent Expenditure | 0.00 | 0.00 |
| 5 | (use Schedule E) Coordinated Expenditures Made by Party | 0.00 | 0.00 |
| | Coordinated Experiatores Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) | 0.00 | 0.00 |
| | (222 23.10001) | | |
| 3. | Loan Repayments Made | 0.00 | 0.00 |
| 7 | Loans Made | 0.00 | 0.00 |
| | Refunds of Contributions To: | 0.00 | 0.00 |
| | (a) Individuals/Persons Other Than Political Committees | 0.00 | 2682.50 |
| | man Fontical Committees | | |
| | (b) Political Party Committees | 0.00 | 0.00 |
| | (c) Other Political Committees | 0.00 | 0.00 |
| | (such as PACs) | 0.00 | 0.00 |
| | (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | 0.00 | 2682.50 |
| | (add Lines 20(a), (b), and (c)) | | |
| 9. | Other Disbursements | 0.00 | 0.00 |
| ٥. | Federal Election Activity (2 U.S.C 431(20)) | | |
| | (a) Shared Federal Election Activity | | |
| | (from Schedule H6) | 0.00 | 0.00 |
| | (i) Federal Share | 0.00 | 0.00 |
| | (ii) "Levin" Share | 0.00 | 0.00 |
| | (b) Federal Election Activity Paid Entirely | 0.00 | 0.00 |
| | With Federal Funds | 0.00 | 0.00 |
| | (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| | Total Disbursements (add Lines 21(c), 22, | | |
| | 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 69580.59 | 668969.94 |
| 2. | Total Federal Disbursements | | |
| | (subtract Line 21(a)(ii) from Line 30(a)(ii) | | |
| | | 69580.59 | 668969.94 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|----------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) | 105460.67 | 757178.54 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 2682.50 |
| S5. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 105460.67 | 754496.04 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 580.59 | 110787.44 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 580.59 | 110787.44 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 6 / 173 (check only one) X 11a 11b 11c 12 |
|--|---|--|
| Any information copied from such Reports and St or for commercial purposes, other than using the | atements may not be sold or used by any pename and address of any political committee | erson for the purpose of soliciting contributions et to solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) National Association of Insurance and tee | | |
| Full Name (Last, First, Middle Initial) Ms. Robelynn H. Abadie Mailing Address 4933 Antioch Blvd. City Baton Rouge FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General | State Zip Code LA 70817 C Occupation Insurance Agent Aggregate Year-to-Date ▼ | Date of Receipt M |
| Other (specify) Full Name (Last, First, Middle Initial) | 338.00 | Date of Pennint |
| Mr. Michael J. Ables, LUTCF Mailing Address PO Box 2205 City Avila Beach FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | State Zip Code CA 93424-2205 C Occupation Insurance Agent Aggregate Year-to-Date ▼ | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R484486 Amount of Each Receipt this Period 105.00 Payroll Deduction |
| Full Name (Last, First, Middle Initial) Mr. Paul Adams Mailing Address 5101 Missy Maric Lane City Las Vegas FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State Zip Code NV 89130 C Occupation Insurance Agent Aggregate Year-to-Date ▼ | Date of Receipt M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| SUBTOTAL of Receipts This Page (optional) | | 276.00 |
| TOTAL This Period (last page this line number of | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 7 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|----------------------|---|---|--|--|
| An or | y information copied from such Reports and Stat for commercial purposes, other than using the na | ements may ame and add | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F | inancial A | dvisors Political Action Com | mit- |
| A. 3. | Full Name (Last, First, Middle Initial) Mr Emmette F. Albritton, II,LUTCF Mailing Address 20683 Running Creek Ch Suite A City Stanfield FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. James M. Allen Mailing Address 414 McCall Street City | State NC C Occupation Insurance Aggregate | Zip Code 28163 n e Agent e Year-to-Date ▼ 660.00 | Date of Receipt M M M / D D / 2 4 2 0 0 7 Transaction ID: R486245 Amount of Each Receipt this Period 220.00 Credit Card Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | Waukesha FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Occupation Insurance Aggregate | | Amount of Each Receipt this Period 30.00 Payroll Deduction |
| - . | Full Name (Last, First, Middle Initial) Ms. Carol A. Anderson, LUTCF, CFP Mailing Address 717 N. 87th St. City Omaha FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State NE C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| s | UBTOTAL of Receipts This Page (optional) | |) | 300.00 |
| T | OTAL This Period (last page this line number on | lv) | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the | FOR LINE NUMBER: PAGE 8 / 173 (check only one) |
|----------------------|---|----------------------------|---|---|
| • | | | Detailed Summary Page | X 11a 11b 11c 12 13 14 15 16 17 |
| An or | y information copied from such Reports and Stat for commercial purposes, other than using the na | tements may ame and add | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F tee | inancial A | dvisors Political Action Com | mit- |
| <u>′</u> ۵. | Full Name (Last, First, Middle Initial) Mr. Robert B. Anderson, CLU | | | Date of Receipt |
| | Mailing Address 1456 Old Boones Creek | | - | 0 9 1 0 2 0 0 7 |
| | City Jonesborough | State TN | Zip Code 37659 | Transaction ID: R485147 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 0.000 | 50.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ | | Year-to-Date ▼ 450.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. William C. Anderson, LUTCF | | | Date of Receipt |
| | Mailing Address 205 Whippoorwill Lane | 09 10 2007 | | |
| | City Altamonte Spgs | State FL | Zip Code 32701-7827 | Transaction ID: R485497 |
| | FEC ID number of contributing federal political committee. | C | 32/01-762/ | Amount of Each Receipt this Period 25.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 425.00 | |
|) . | Full Name (Last, First, Middle Initial) Mr. William R. Anderson | | | Date of Receipt |
| | Mailing Address 1842 Vermont Ave NW | | | 09 / 14 / 2007 |
| | City Washington | State DC | Zip Code 20001-5006 | Transaction ID: R485803 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 20.83 |
| | Name of Employer Self-employed | Occupation Insurance | | Check |
| | Receipt For: Primary General Other (specify) | Aggregate | Year-to-Date ▼ 354.11 | |
| S | UBTOTAL of Receipts This Page (optional) | | | 95.83 |
| T | OTAL This Period (last page this line number on | ıly) |) | |

| SCHEDULE A (FEC Form 3X) | Use separate schedule(s) | (check only one) |
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| ITEMIZED RECEIPTS | or each category of the Detailed Summary Page | X 11a 11b 11c 12 |
| | , , | 13 14 15 16 17 |
| Any information copied from such Reports and Statemer or for commercial purposes, other than using the name a | nts may not be sold or used by any person and address of any political committee to so | for the purpose of soliciting contributions plicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | | |
| National Association of Insurance and Finan tee | cial Advisors Political Action Comm | it- |
| Full Name (Last, First, Middle Initial) A. Mr. William R. Anderson | | Date of Receipt |
| Mailing Address 1842 Vermont Ave NW | | 09 28 2007 |
| City | ate Zip Code | Transaction ID: R486342 |
| <u>Washington</u> D | C 20001-5006 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | 20.83 |
| Self-employed 1 | cupation | Check |
| 1110 | urance Agent gregate Year-to-Date ▼ | |
| Primary General | 054.11 | |
| Other (specify) ▼ | 354.11 | |
| Full Name (Last, First, Middle Initial) 3. Mr. David William Ashley | | Date of Receipt |
| Mailing Address 10939 N W 32 Pl | 09 10 2007 | |
| • | ate Zip Code | Transaction ID: R484749 |
| <u>Gainesville</u> F | L 32606 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | 42.00 |
| Self-employed 1 | cupation urance Agent | Payroll Deduction |
| | gregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 252.00 | |
| | 0 0 0 0 0 0 0 0 0 | |
| Full Name (Last, First, Middle Initial) Mr. David William Ashley | | Date of Receipt |
| Mailing Address 10939 N W 32 PI | | 09 17 2007 |
| , | ate Zip Code | Transaction ID: R485921 |
| <u>Gainesville</u> F | L 32606 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | | -42.00 |
| Self-employed * | cupation urance Agent | RT |
| Receipt For: Ag | gregate Year-to-Date ▼ | |
| Primary General Other (specify) | 252.00 | |
| Guici (specify) 🔻 | | |
| SUBTOTAL of Receipts This Page (optional) | > | 20.83 |
| TOTAL This Period (last page this line number only) | > | |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 10 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|---|---|--|---|
| Any information copied from such Reports and or for commercial purposes, other than using the | Statements may | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions oslicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) National Association of Insurance and tee | d Financial A | dvisors Political Action Com | mit- |
| Full Name (Last, First, Middle Initial) A. Mr. Douglas Austin, CLU Mailing Address Suite 9 Kite Hill Rd City Santa Cruz FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State CA C Occupatio Insuranc Aggregate | | Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: R484358 Amount of Each Receipt this Period 22.50 Payroll Deduction |
| Full Name (Last, First, Middle Initial) Mr. Douglas E. Aycock, CLU, ChFC Mailing Address 5113 Southwest Pkwy City Austin FEC ID number of contributing federal political committee. Name of Employer | y # 200 State TX C | Zip Code 78735-8915 | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Self-employed Receipt For: Primary General Other (specify) ▼ | Insuranc | | |
| Full Name (Last, First, Middle Initial) Mr. Gregory A. Bailey, FSS Mailing Address 15111 Bernis St City Omaha FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: | State NE C Occupatio Insuranc Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R486008 Amount of Each Receipt this Period 250.00 Credit Card |
| Primary General Other (specify) SUBTOTAL of Receipts This Page (optional). TOTAL This Period (last page this line number) | | 250.00 | 315.00 |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 11 / 173 |
|-----------|---|----------------------|--------------------------------------|--|
| | EMIZED RECEIPTS | | or each category of the | (check only one) X 11a 11b 11c 12 |
| | _ | | Detailed Summary Page | 13 14 15 16 17 |
| Ar | y information copied from such Reports and Sta for commercial purposes, other than using the n | itements may | not be sold or used by any perso | on for the purpose of soliciting contributions |
| <u>\</u> | NAME OF COMMITTEE (In Full) | arric and add | iress or arry political committee to | Solicit Contributions from Sacri Contributes. |
| \rangle | National Association of Insurance and F | inancial A | dvisors Political Action Com | mit- |
| ۹. | Full Name (Last, First, Middle Initial) Mr. Rakesh R. Bansal, LUTCF | | | Date of Receipt |
| | Mailing Address 5 Rutledge Ct. | | | 09 / 07 / Y Y Y Y Y Y Y |
| | City Plainsboro | State NJ | Zip Code 08536 | Transaction ID: R485633 |
| | FEC ID number of contributing | | 00000 | Amount of Each Receipt this Period |
| | federal political committee. | C | | 180.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Credit Card |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 360.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. James T. Bardin, CLU, ChFC | | | Date of Receipt |
| | Mailing Address 4226 Fairway Circle | 09 10 7 2007 | | |
| | City | State | Zip Code | Transaction ID: R483545 |
| | Tampa | FL | 33624-4640 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 22.50 |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Receipt For: | Insurance | e Agent • Year-to-Date ▼ | - |
| | Primary General | 139.19 | | 1 |
| | Other (specify) ▼ | | 202.50 | |
|). | Full Name (Last, First, Middle Initial) Mr. Danny Barrera | | | Date of Receipt |
| | Mailing Address 3328 34th Ave Ct | | | 0 9 1 9 2 0 0 7 |
| | City | State | Zip Code | Transaction ID: R485865 |
| | Greeley | СО | 80634-9428 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 50.00 |
| | Name of Employer Self-employed | Occupation | | Check |
| | Receipt For: | | Year-to-Date ▼ | 7 |
| | Primary General Other (specify) ▼ | | 300.00 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 252.50 |
| _ | OT 11 TO 12 | | | |
| T | OTAL This Period (last page this line number or | 1Iy) | . | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 12 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
|----------------------|---|--|--|---|
| An or | y information copied from such Reports and Stat for commercial purposes, other than using the na | ements may | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee | nancial A | dvisors Political Action Com | mit- |
| ۸. | Full Name (Last, First, Middle Initial) Mr. Jack J. Barry, LUTCF Mailing Address 222 SW Columbia St Ste | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | |
| | City Portland | State OR | Zip Code 97201-6640 | Transaction ID: R486194 |
| | FEC ID number of contributing federal political committee. | C | 37201-0040 | Amount of Each Receipt this Period 250.00 |
| | Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Occupation Insurance Aggregate | | Credit Card |
| 3. | Full Name (Last, First, Middle Initial) Mr. John C. Beckwith Mailing Address 1908 Greenbriar Drive | | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | Transaction ID: R484908 | | |
| | Portage | MI | 49024-5787 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 42.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 428.00 | |
| C. | Full Name (Last, First, Middle Initial) Mr. John C. Beckwith | | | Date of Receipt |
| | Mailing Address 1908 Greenbriar Drive | | | 0 9 2 4 2 0 0 7 |
| | City | State | Zip Code | Transaction ID: R486217 |
| | Portage FEC ID number of contributing federal political committee. | C | 49024-5787 | Amount of Each Receipt this Period 50.00 |
| | Name of Employer Self-employed | Occupation | | Credit Card |
| _ | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 428.00 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 342.00 |
| т. | OTAL This Period (last page this line number on | lv) | | |

| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 13 / 173 |
|--|--------------|--|--|
| ITEMIZED RECEIPTS | | or each category of the | (check only one) |
| | | Detailed Summary Page | X 11a 11b 11c 12 15 16 17 |
| Any information copied from such Reports and St or for commercial purposes, other than using the | atements may | y not be sold or used by any perso | on for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) | name and add | aroos or arry political committee to | Sound Continuations from Such Continuete. |
| National Association of Insurance and tee | Financial A | dvisors Political Action Com | mit- |
| Full Name (Last, First, Middle Initial) | | | 8. (8.) |
| Mr. Michael E. Behar Mailing Address 2319 Cheshire Woods | Rd. | | Date of Receipt |
| Z319 Cheshire Woods | nu | | 09 10 2007 |
| City | State | Zip Code | Transaction ID: R484397 |
| Toledo | OH | 43617-1202 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 22.50 |
| Name of Employer | Occupation | n | Payroll Deduction |
| Self-employed 7 | Insuranc | | |
| Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | | 202.50 | |
| Full Name (Last, First, Middle Initial) 3. Mr. Daniel C. Bell | | | Date of Receipt |
| Mailing Address P. O. Box 1747 | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R483378 |
| Cleveland | MS | 38732-1747 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.00 |
| Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Insuranc | e Agent e Year-to-Date ▼ | _ |
| Receipt For: Primary General | Aggregate | | 1 |
| Other (specify) ▼ | 0 0 | 225.00 | |
| Full Name (Last, First, Middle Initial) 6. Mr. Kevin L. Bell, CLU, ChFC, | | | Date of Receipt |
| Mailing Address 318 West Greyhound F | ass | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R486191 |
| Carmel | IN | 46032-7007 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 250.00 |
| Name of Employer Self-employed | Occupation | | Credit Card |
| Receipt For: | | e Year-to-Date ▼ | 7 |
| Primary General Other (specify) ▼ | | 250.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 297.50 |
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| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 14 / 173 |
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| | EMIZED RECEIPTS | | or each category of the | (check only one) |
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| or | y information copied from such Reports and Stat for commercial purposes, other than using the na | me and add | lress of any political committee to | solicit contributions from such committee. |
| \setminus | NAME OF COMMITTEE (In Full) | | | |
| | National Association of Insurance and Fitee | nancial Ad | dvisors Political Action Com | mit- |
| A. | | | | Date of Receipt |
| | Mailing Address 280 Hollow Road | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R485520 |
| | Muncy | PA | 17756-5789 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 87.50 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | | 1 |
| | Other (specify) | 0 0 | 787.50 | |
| _ | Full Name (Last, First, Middle Initial) | | | Para di Para di I |
| В. | Mr. Michael D. Bennetti, LUTCF Mailing Address 202 Pebble Valley Dr. | | | Date of Receipt |
| | ZOZ PEDDIE Valley DI. | 09 24 2007 | | |
| | City | State | Zip Code | Transaction ID: R486172 |
| | Dover | DE | 19904-9462 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 125.00 |
| | Name of Employer Self-employed | Occupation | 1 | Credit Card |
| | | Insurance | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | ''' | 550.00 | |
| | Curior (openity) | 0 0 | | 1 |
| <u> </u> | Full Name (Last, First, Middle Initial) Mr. Robert A. Berg, CLU, LUTCF | | | Date of Receipt |
| | Mailing Address 1405 Blackberry Lane | | | M M / D D / Y Y Y Y |
| | | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R484202 |
| | Stevens Point | WI | 54481-9140 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 36.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | 070.00 | 1 |
| | Other (specify) ▼ | | 276.00 | 1 |
| | | | | 248.50 |
| S | UBTOTAL of Receipts This Page (optional) | | | 270.00 |
| _ | OTAL This Period (last page this line number on | lv) | | |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 15/1/3 |
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| Ar | y information copied from such Reports and Stateme | ents may | not be sold or used by any perso | |
| or | for commercial purposes, other than using the name | and add | lress of any political committee to | solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) | | | |
| \rangle | National Association of Insurance and Fina tee | ncial Ad | dvisors Political Action Com | nit- |
| | Full Name (Last, First, Middle Initial) Mr. Thomas C. Besselman | | | Date of Respire |
| ٦. | Mailing Address 6421 Perkins Rd # 2b | | | Date of Receipt |
| | | | | 09 10 2007 |
| | • | State | Zip Code | Transaction ID: R484021 |
| | Baton Rouge I | LA | 70808-4125 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | | | 50.00 |
| | Name of Employer October Self-employed In | ccupation | 1 | Payroll Deduction |
| | Self-employed In | surance | e Agent | |
| | Receipt For: | ggregate | Year-to-Date ▼ | |
| | Primary General | | 450.00 | |
| | Other (specify) ▼ | 0 0 | 0 0 0 0 0 0 0 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. George A. Beutter, LUTCF | | | Date of Receipt |
| | Mailing Address 2520 Miami St | | 09 19 2007 | |
| | City | State | Zip Code | Transaction ID: R485886 |
| | South Bend I | <u>IN</u> | 46614 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | | | 250.00 |
| | Name of Franksia | | | Check |
| | Self-employed 1 | ccupatior surance | | |
| | | | Year-to-Date ▼ | - |
| | Primary General | 33 13 | | |
| | Other (specify) ▼ | 0 0 | 300.00 | |
| _ | Full Name (Last, First, Middle Initial) | | | Data of Bassist |
| J. | Mr. David B. Bianchi, CLU Mailing Address 1125 Beldon Way | | | Date of Receipt |
| | Walling Address 1125 Beldoll Way | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R484714 |
| | Reno | NV | 89503-3164 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | | | 60.00 |
| | Name of Employer Oc | ccupation | 1 | Payroll Deduction |
| | Solf amployed * | surance | | |
| | Receipt For: | ggregate | Year-to-Date ▼ | |
| | Primary General | | 540.00 | |
| | Other (specify) ▼ | 1 1 | 010.00 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 360.00 |
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| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 16 / 173 | |
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| Any or f | r information copied from such Reports and Stat or commercial purposes, other than using the na | ements may ame and add | rnot be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. | |
| | NAME OF COMMITTEE (In Full) | | | | _ |
| \rangle | National Association of Insurance and Fitee | nancial A | dvisors Political Action Com | nit- | |
| | Full Name (Last, First, Middle Initial) Mr. J. Blayne Bird | | | Date of Receipt | |
| | Mailing Address 315 Willow Drive | | | 0 9 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | |
| | City | State | Zip Code | Transaction ID: R483334 | |
| | Blackfoot | ID | 83221-3907 | Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | C | | 30.00 | |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction | |
| | Receipt For: | Insurance | e Agent • Year-to-Date ▼ | \dashv | |
| | Primary General Other (specify) ▼ | Aggregate | 270.00 | | |
| | Full Name (Last, First, Middle Initial) Mr. Harlynn N. Bjerke, LUTCF | | | Date of Receipt | |
| | Mailing Address P. O. Box 144 | 0 9 1 0 7 Y Y Y Y Y Y Y | | | |
| | City | State | Zip Code | Transaction ID: R483779 | |
| | Adams | ND | 58210-0144 | Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | C | | 30.00 | |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction | |
| | Receipt For: | | Year-to-Date ▼ | | |
| | Primary General | 00 0 | | | |
| | Other (specify) ▼ | 0 0 | 280.80 | | |
| | Full Name (Last, First, Middle Initial) Mr. Harlynn N. Bjerke, LUTCF | | | Date of Receipt | |
| | Mailing Address P. O. Box 144 | | | 09 18 YYYY 2007 | |
| | City | State | Zip Code | Transaction ID: R485858 | |
| | Adams | ND | 58210-0144 | Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | С | | 30.00 | |
| | Name of Employer Self-employed | Occupation Insurance | | Check | |
| | Receipt For: | | Year-to-Date ▼ | 1 | |
| | Primary General Other (specify) ▼ | | 280.80 | | |
| | JBTOTAL of Receipts This Page (optional) | | | 90.00 | |
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| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 17 / 173 |
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| Δ, | ay information copied from such Reports and Staten | nente may | y not be sold or used by any person | |
| or | ny information copied from such Reports and Staten for commercial purposes, other than using the nam | e and add | lress of any political committee to | osolicit contributions from such committee. |
| \setminus | NAME OF COMMITTEE (In Full) | | | |
| | National Association of Insurance and Finatee | ancial Ad | dvisors Political Action Com | mit- |
| A. | | | | Date of Receipt |
| | Mailing Address 9439 Gay Lane | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R483581 |
| | Oil City | LA | 71061 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 62.50 |
| | Self-employed | occupation rsurance | | Payroll Deduction |
| | | | Year-to-Date ▼ | |
| | Primary General | 00 0 | | 1 |
| | Other (specify) | 0 0 | 537.50 | |
| _ | Full Name (Last, First, Middle Initial) | | | Patro (Paratit |
| В. | Ms. Eleanor B. Blaylock Mailing Address 9439 Gay Lane | | | Date of Receipt |
| | Walling Address 9459 Gay Latte | 09 21 2007 | | |
| | City | State | Zip Code | Transaction ID: R486046 |
| | Oil City | LA | 71061 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee | | | 50.00 |
| | federal political committee. | | | Cupdit Coud |
| | Self-employed 1 | occupation | | Credit Card |
| | | nsurance | | |
| | Receipt For: Primary General | Aggregate | Year-to-Date ▼ | |
| | Other (specify) | | 537.50 | |
| | | | | 4 |
| C. | Full Name (Last, First, Middle Initial) Mr. Brian D. Boesiger, CSA, LUTC | | | Date of Receipt |
| Ο. | Mailing Address 7021 S. 33rd Street | | | M M / D D / Y Y Y Y |
| | | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R482291 |
| | Lincoln | NE | 68516-4886 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 30.00 |
| | Self-employed | occupation rsurance | | Payroll Deduction |
| | | | Year-to-Date V | \dashv |
| | Primary General | 33 - 3 | | 1 |
| | Other (specify) ▼ | 0 0 | 270.00 | 1 |
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| s | SUBTOTAL of Receipts This Page (optional) | | | 142.50 |
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| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 18 / 173 |
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| Any information copied from such Reports and S or for commercial purposes, other than using the | Statements may e name and add | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) | | , , , , , , , , , , , , , , , , , , , | |
| National Association of Insurance and tee | d Financial A | dvisors Political Action Com | mit- |
| Full Name (Last, First, Middle Initial) A. Mr. Robert J. Bohne, ARPC | | | Date of Receipt |
| Mailing Address 281 Moonraker Drive | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R486135 |
| Slidell | LA | 70458-5524 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 150.00 |
| Name of Employer | Occupatio | n | Credit Card |
| Self-employed | Insuranc | e Agent | |
| Receipt For: | Aggregate | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | | 250.00 | |
| Full Name (Last, First, Middle Initial) 3. Mr. Lane Boozer | | | Date of Receipt |
| Mailing Address 1400 N Corinth St Ste | 109 | | 09 10 / Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R483288 |
| Corinth | TX | 76208-5444 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 50.00 |
| Name of Employer Self-employed | Occupatio | | Payroll Deduction |
| Receipt For: | Insuranc | e Agent e Year-to-Date ▼ | _ |
| Primary General | Aggregate | | 1 |
| Other (specify) ▼ | 0 0 | 380.00 | |
| Full Name (Last, First, Middle Initial) Mr. Terry A. Boulter, CLU, ChFC, | • | | Date of Receipt |
| Mailing Address 9037 N Silver Lake Di | rive | | 0 9 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R483645 |
| Cedar Hills | UT | 84062-8788 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | | 22.50 |
| Name of Employer Self-employed | Occupatio Insuranc | | Payroll Deduction |
| Receipt For: | | e Year-to-Date ▼ | 7 |
| Primary General Other (specify) ▼ | 0 0 | 202.50 | |
| SUBTOTAL of Receipts This Page (optional) . | 1 | | 222.50 |
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| TOTAL This Period (last page this line number | only) |) | |

| SC | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 19 / 173 (check only one) |
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| _ | NAME OF COMMITTEE (In Full) | | , , , , , , , , , , , , , , , , , , , | |
| \rangle | National Association of Insurance and F | inancial A | dvisors Political Action Com | mit- |
| ۹. | Full Name (Last, First, Middle Initial) Mr. Guy S. Bowering | | | Date of Receipt |
| | Mailing Address 129 Woodland Hills Blvd | 09 / 10 / Y Y Y Y Y | | |
| | City | State | Zip Code | Transaction ID: R485468 |
| | Madison | MS | 39110 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 22.50 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 202.50 |] |
| 3. | Full Name (Last, First, Middle Initial) Mr. John J. Bradley, CLU | | | Date of Receipt |
| | Mailing Address 148 Grove Street | 09 10 / Y Y Y Y Y | | |
| | City | State | Zip Code | Transaction ID: R484540 |
| | Westwood | MA | 02090 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 41.66 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General Other (specify) | | 374.94 | 1 |
| | | 0 0 | 0 0 0 0 0 0 0 | J. |
| C. | Full Name (Last, First, Middle Initial) Mr. Gary A. Bramon, CLU, ChFC | 0 0 | | Date of Receipt |
| D . | | | | 09 10 / Y Y Y Y Y Y |
| D . | Mr. Gary A. Bramon, CLU, ChFC Mailing Address 269 San Felipe Way City | State | Zip Code | M M / D D / Y Y Y Y |
| - | Mr. Gary A. Bramon, CLU, ChFC Mailing Address 269 San Felipe Way City Novato | State CA | Zip Code 94945-1687 | 09 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| C . | Mr. Gary A. Bramon, CLU, ChFC Mailing Address 269 San Felipe Way City | | • | Transaction ID: R485105 Amount of Each Receipt this Period 50.00 |
| C . | Mr. Gary A. Bramon, CLU, ChFC Mailing Address 269 San Felipe Way City Novato FEC ID number of contributing | CA C Occupation | 94945-1687 | Transaction ID: R485105 Amount of Each Receipt this Period |
| Э. | Mr. Gary A. Bramon, CLU, ChFC Mailing Address 269 San Felipe Way City Novato FEC ID number of contributing federal political committee. Name of Employer | CA C Occupation Insurance | 94945-1687 | Transaction ID: R485105 Amount of Each Receipt this Period 50.00 |
| C . | Mr. Gary A. Bramon, CLU, ChFC Mailing Address 269 San Felipe Way City Novato FEC ID number of contributing federal political committee. Name of Employer Self-employed | CA C Occupation Insurance | 94945-1687 n e Agent | Transaction ID: R485105 Amount of Each Receipt this Period 50.00 |
| S. | Mr. Gary A. Bramon, CLU, ChFC Mailing Address 269 San Felipe Way City Novato FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General | CA C Occupation Insurance Aggregate | 94945-1687 Pe Agent Year-to-Date ▼ 450.00 | Transaction ID: R485105 Amount of Each Receipt this Period 50.00 Payroll Deduction |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 20 / 173 | | |
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| or | y information copied from such Reports and Stat for commercial purposes, other than using the na | ame and add | lress of any political committee to | o solicit contributions from such committee. | | |
| \setminus | NAME OF COMMITTEE (In Full) | | | | | |
| | National Association of Insurance and Fitee | nancial Ad | dvisors Political Action Com | mit- | | |
| A. | | | | Date of Receipt | | |
| | Mailing Address 2103 Sunset Lane | | | 09 10 2007 | | |
| | City | State | Zip Code | Transaction ID: R484283 | | |
| | La Crosse | WI | 54601 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | C | | 30.00 | | |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction | | |
| | Receipt For: | | Year-to-Date ▼ | | | |
| | Primary General | | 270.00 | 1 | | |
| | Other (specify) ▼ | | 270.00 | | | |
| _ | Full Name (Last, First, Middle Initial) | | | 5. 75 1. | | |
| В. | Mr. William J. Brannon, CLU,CPCU | Date of Receipt | | | | |
| | Mailing Address 5215 Mockingbird Road | 09 10 2007 | | | | |
| | City | State | Zip Code | Transaction ID: R485176 | | |
| | Greensboro | NC | 27406 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee | | | 23.10 | | |
| | federal political committee. | | | | | |
| | Name of Employer Self-employed | Occupation | 1 | Payroll Deduction | | |
| | | Insurance | | | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | | | |
| | Primary General Other (specify) ▼ | | 207.90 | | | |
| | and (openly) • | | | | | |
| <u></u> | Full Name (Last, First, Middle Initial) | | | Data of Descipt | | |
| U. | Mr. Ronald D. Brant, CLU, LUTCF Mailing Address 10234 Hoffman | | | Date of Receipt | | |
| | 10254 Homman | | | 09 10 2007 | | |
| | City | State | Zip Code | Transaction ID: R485263 | | |
| | Maybee | MI | 48159-9777 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | С | | 208.00 | | |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction | | |
| | Receipt For: | Insurance | e Agent Year-to-Date ▼ | _ | | |
| | Primary General | Aggregate | Teal-10-Date V | 7 | | |
| | Other (specify) ▼ | 1 | 1972.00 | | | |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 21 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| An or | y information copied from such Reports and Sta for commercial purposes, other than using the r | atements may name and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F | Financial A | dvisors Political Action Com | mit- |
| A. | Full Name (Last, First, Middle Initial) Mr. Ronald D. Brant, CLU, LUTCF Mailing Address 10234 Hoffman City Maybee FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State MI C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R485990 Amount of Each Receipt this Period 50.00 Credit Card |
| 3. | Full Name (Last, First, Middle Initial) Mr. Frank H. Briggs, Jr., CLU, C Mailing Address 2610 Bohler Rd NW City Atlanta FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General | State GA C Occupation Insurance Aggregate | e Agent e Year-to-Date ▼ | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| C . | Full Name (Last, First, Middle Initial) Mr. Daryl W. Broberg, MDRT Mailing Address 1531 3rd St. City Sutherland FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | State NE C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| SI | UBTOTAL of Receipts This Page (optional) | | | 125.00 |
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| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 22 / 173 | | |
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| or | y information copied from such Reports and State for commercial purposes, other than using the nar | ne and add | lress of any political committee to | solicit contributions from such committee. | | |
| \setminus | NAME OF COMMITTEE (In Full) | | | | | |
| | National Association of Insurance and Firtee | nancial Ad | dvisors Political Action Com | mit- | | |
| A. | Full Name (Last, First, Middle Initial) Mr. Albert B. Brodbeck, CLU | | | Date of Receipt | | |
| | Mailing Address 56 Dundee Road | | | 09 10 2007 | | |
| | City | State | Zip Code | Transaction ID: R484639 | | |
| | Stamford | CT | 06903-3623 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | C | | 17.50 | | |
| | Self-employed 1 | Occupation Insurance | | Payroll Deduction | | |
| | | | Year-to-Date ▼ | | | |
| | Primary General | | | 1 | | |
| | Other (specify) | 0 0 | 202.50 | | | |
| _ | Full Name (Last, First, Middle Initial) | | | B : (B :: | | |
| В. | Mr. Albert B. Brodbeck, CLU Mailing Address 56 Dundee Road | | | Date of Receipt | | |
| | Walling Address So Duridee Road | | 09 19 2007 | | | |
| | City | State | Zip Code | Transaction ID: R485875 | | |
| | Stamford | CT | 06903-3623 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee | | | 50.00 | | |
| | federal political committee. | | | | | |
| | Solf amployed | Occupation | | Check | | |
| | | Insurance | | | | |
| | Receipt For: Primary General | Aggregate | Year-to-Date ▼ | , | | |
| | Other (specify) | | 202.50 | | | |
| | | | | | | |
| C. | Full Name (Last, First, Middle Initial) Mr. John J. Brooking, CFP | | | Date of Receipt | | |
| Ο. | Mailing Address 8905 S. Heather Dr. | | | M M / D D / Y Y Y Y | | |
| | | g. real 333 0000 G. Fleather Dr. | | | | |
| | City | State | Zip Code | Transaction ID: R486232 | | |
| | Tempe | AZ | 85284-3455 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | C | | 120.00 | | |
| | Self-employed 1 | Occupation | | Credit Card | | |
| | | Insurance | | _ | | |
| | Receipt For: Primary General | Aggregate | Year-to-Date ▼ | , | | |
| Other (specify) | | | 420.00 | | | |
| | | | | | | |
| | | 187.50 | | | | |
| S | UBTOTAL of Receipts This Page (optional) | |) | 107.30 | | |
| | OTAL This Period (last page this line number only | d) | | | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 23 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar or | ny information copied from such Reports and State for commercial purposes, other than using the r | atements may name and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and I tee | Financial A | dvisors Political Action Com | mit- |
| A. | Full Name (Last, First, Middle Initial) Mr. C. Robert Brown, Sr. Mailing Address 8675 WestCott City Germantown FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State TN C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R483330 Amount of Each Receipt this Period 62.50 Payroll Deduction |
| 3. | Full Name (Last, First, Middle Initial) Mr. James Walter Brown, LUTCF Mailing Address 6334 Deveron Drive City Charlotte FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State NC C Occupatio Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R483411 Amount of Each Receipt this Period 23.10 Payroll Deduction |
| - | Full Name (Last, First, Middle Initial) Mr. Michael O. Brown, LUTCF Mailing Address 6512 Nell 3 City Edmond FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State OK C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| s | UBTOTAL of Receipts This Page (optional) | | | 145.60 |
| T | OTAL This Period (last page this line number o | ınlv) | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 24 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar or | y information copied from such Reports and Sta for commercial purposes, other than using the r | atements may | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and I tee | inancial A | dvisors Political Action Com | mit- |
| A . | Full Name (Last, First, Middle Initial) Ms. Patricia Beal Brown Mailing Address PO Box 109 City Macon FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State GA C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R485902 Amount of Each Receipt this Period 1250.00 Check |
| 3. | Full Name (Last, First, Middle Initial) Mr. Peter C. Browne, LUTCF Mailing Address 10 Old Jackson Ave. 14 Tenby Court City Hasting-Hdsn FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State NY C Occupation Insurance Aggregate | | Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: R486068 Amount of Each Receipt this Period 437.50 Credit Card |
| D. | Full Name (Last, First, Middle Initial) Mr. Dennis A. Brumbaugh, LUTCF Mailing Address 17 Conley Lane City Elma FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State WA C Occupation Insurance Aggregate | | Date of Receipt M M |
| s | UBTOTAL of Receipts This Page (optional) | | | 1730.00 |
| Т | OTAL This Period (last page this line number o | nlv) | | |

| S | CHEDULE A (FEC Form 3X) | | | FOR LINE NUMBER: PAGE 25 / 173 |
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| | | | Use separate schedule(s) or each category of the | (check only one) |
| 11 | EMIZED RECEIPTS | | Detailed Summary Page | X 11a 11b 11c 12 |
| | | | | 13 14 15 16 17 |
| An or | y information copied from such Reports and Stater for commercial purposes, other than using the nam | ments may | not be sold or used by any perso lress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| _ | NAME OF COMMITTEE (In Full) | | 7,61 | |
| \rangle | National Association of Insurance and Fin | ancial Ad | dvisors Political Action Com | mit- |
| _ | Full Name (Last, First, Middle Initial) | | | |
| ۹. | Mr. Timothy J. Brungardt, LUTCF | | | Date of Receipt |
| | Mailing Address 314 N. 5th. | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R483819 |
| | Norfolk | NE | 68701-4093 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | | | 25.00 |
| | federal political committee. | С | | 25.00 |
| | Name of Employer Self-employed | Occupation | 1 | Payroll Deduction |
| | | nsurance | | |
| | | Aggregate | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 225.00 | |
| | Other (specify) | 0 0 | 0 0 0 0 0 0 0 0 | |
| _ | Full Name (Last, First, Middle Initial) | | | Patro (Parairi |
| э. | Mr. George B. Bryce, CLU, ChFC Mailing Address 2730 Ardon Ln | Date of Receipt | | |
| | Walling Address 2750 Ardon En | 09 10 2007 | | |
| | City | State | Zip Code | Transaction ID: R485074 |
| | Casper | WY | 82609-3902 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | С | | 42.00 |
| | federal political committee. | <u> </u> | | |
| | Name of Employer | Occupation | 1 | Payroll Deduction |
| | Self-employed | nsurance | e Agent | |
| | | Aggregate | Year-to-Date ▼ | |
| | Primary General | | 428.00 | |
| | Other (specify) | 0 0 | | |
| ` | Full Name (Last, First, Middle Initial) Mr. George B. Bryce, CLU, ChFC | | | Date of Receipt |
| ٠. | Mailing Address 2730 Ardon Ln | | | M M / D D / Y Y Y Y |
| | | | | 09 14 2007 |
| | City | State | Zip Code | Transaction ID: R485819 |
| | Casper | WY | 82609-3902 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 50.00 |
| | | | | Cash |
| | Salf-amployed 1 | Occupation | | |
| | | nsurance Aggregate | e Agent Year-to-Date ▼ | - |
| | Primary General | riggrogato | Total to Buto V | |
| | Other (specify) ▼ | | 428.00 | |
| | 1 | | | |
| s | UBTOTAL of Receipts This Page (optional) | | | 117.00 |
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| T | OTAL This Period (last page this line number only) |) | | |

| IT | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 26 / 173 (check only one) X |
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| Ar or | y information copied from such Reports and Staten for commercial purposes, other than using the nam | nents may ne and add | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Finatee | ancial Ad | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Mr. Trent Dana Bryson, CFP Mailing Address 4012 E 6th St City Long Beach FEC ID number of contributing federal political committee. Name of Employer Self-employed | State CA C Decupation nsurance Aggregate | | Date of Receipt M M M / 20 / 2007 Transaction ID: R486010 Amount of Each Receipt this Period 250.00 Credit Card |
| 3. | Name of Employer Self-employed | State OK C Decupation nsurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R484728 Amount of Each Receipt this Period 60.00 Payroll Deduction |
| 5. | Name of Employer Self-employed | State ND C Occupation nsurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R483778 Amount of Each Receipt this Period 30.00 Payroll Deduction |
| s | UBTOTAL of Receipts This Page (optional) | | | 340.00 |
| T | OTAL This Period (last page this line number only) | | | |

| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 27 / 173 | | | | |
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| ITEMIZED RECEIPTS | | or each category of the | (check only one) | | | | |
| •• | LIMIZED REGEN 10 | Detailed Summary Page | X 11a 11b 11c 12 13 14 15 16 17 | | | | |
| Ar | ny information copied from such Reports and Statements | may not be sold or used by any perso | | | | | |
| or | for commercial purposes, other than using the name and | address of any political committee to | solicit contributions from such committee. | | | | |
| | NAME OF COMMITTEE (In Full) | | | | | | |
| | National Association of Insurance and Financia tee | Advisors Political Action Com | mit- | | | | |
| Α. | Full Name (Last, First, Middle Initial) Ms. Donna J. Burrill, CLU, ChFC, | | Date of Receipt | | | | |
| | Mailing Address P.O.BOX 143 | | 09 10 2007 | | | | |
| | City State | Zip Code | Transaction ID: R485281 | | | | |
| | FORT COLLINS CO | 80522-0143 | Amount of Each Receipt this Period | | | | |
| | FEC ID number of contributing federal political committee. | | 30.00 | | | | |
| | Name of Employer Occupa | tion | Payroll Deduction | | | | |
| | Self-employed ' | nce Agent | | | | | |
| | | ate Year-to-Date ▼ | | | | | |
| | Primary General | 070.00 | 1 | | | | |
| | Other (specify) ▼ | 270.00 | | | | | |
| — В. | Full Name (Last, First, Middle Initial) Mrs. Evelyn Butler, CLTC, LUTC | | Date of Receipt | | | | |
| | Mailing Address 10 Lincoln Ave. | | 09 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | |
| | City State | Zip Code | Transaction ID: R483501 | | | | |
| | <u>Vernon</u> NJ | 07462 | Amount of Each Receipt this Period | | | | |
| | FEC ID number of contributing federal political committee. | | 25.20 | | | | |
| | Name of Employer Occupa Self-employed Incurs | | Payroll Deduction | | | | |
| | | nce Agent ate Year-to-Date ▼ | - | | | | |
| | Primary General | ato real to Bato V | 1 | | | | |
| | Other (specify) ▼ | 226.80 | | | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Mr. Robert C. Buxman, LUTCF | | Date of Receipt | | | | |
| | Mailing Address 12690 NW Lorraine Dr. | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | |
| | City State | Zip Code | Transaction ID: R485350 | | | | |
| | Portland OR | 97229 | Amount of Each Receipt this Period | | | | |
| | FEC ID number of contributing | | 21.00 | | | | |
| | federal political committee. | | 21.00 | | | | |
| | Name of Employer Occupa Self-employed Insura | ition nce Agent | Payroll Deduction | | | | |
| | | ate Year-to-Date ▼ | - | | | | |
| | Primary General | | 1 | | | | |
| | Other (specify) ▼ | 239.00 | | | | | |
| | LIPTOTAL of Descripto This Descriptional | | 76.20 | | | | |
| S | UBTOTAL of Receipts This Page (optional) | > | | | | | |
| т | TOTAL This Period (last page this line number only) | | | | | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 28 / 1 / 3 (check only one) |
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| Δ, | y information copied from such Reports and Statem | onto mo | • • | 13 14 15 16 17 |
| or | for commercial purposes, other than using the name | ents may e and add | dress of any political committee to | solicit contributions from such committee. |
| \setminus | NAME OF COMMITTEE (In Full) National Association of Insurance and Finatee | ncial A | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Ms. Amy K. Byrne | | | Date of Receipt |
| | Mailing Address 900 N Shoreline Blvd | | | 09 10 2007 |
| | • | State CA | Zip Code 94043-1933 | Transaction ID: R484411 Amount of Each Receipt this Period |
| | EEC ID number of contribution | | | 25.00 |
| | Self-employed 1 | ccupation surance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) | ggregate | e Year-to-Date ▼ 225.00 | |
| В. | Full Name (Last, First, Middle Initial) Mr. David D. Cameron, LUTCF Mailing Address 1142 FAIRVIEW AVE. | | | Date of Receipt |
| | | | | 09 10 2007 |
| | • | State | Zip Code | Transaction ID: R485224 |
| | FFC ID somehow of a softile time. | C | 83350 | Amount of Each Receipt this Period 6.00 |
| | Self-employed 1 | ccupation surance | n e Agent | Payroll Deduction |
| | Receipt For: ☐ Primary ☐ General Other (specify) ▼ | ggregate | e Year-to-Date ▼ 246.00 | |
| C. | Full Name (Last, First, Middle Initial) Mr. Christopher D. Campbell, CLU, ChFC Mailing Address 2511 Brandon Road | | | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | | State | Zip Code | Transaction ID: R484037 |
| | FEC ID assert of a satisfaction | OH | 43221 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | | | 4.25 |
| | Self-employed | ccupation surance | n e Agent | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | ggregate | e Year-to-Date ▼ 267.75 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 35.25 |
| | OTAL This Period (last page this line number only) | | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 29 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar or | y information copied from such Reports and Stateme for commercial purposes, other than using the name | ents may and add | not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Finantee | ncial Ac | dvisors Political Action Com | mit- |
| A. 3. | Full Name (Last, First, Middle Initial) Ms. Mary A. Cannady, LUTCF Mailing Address P. O. Box 799 City S Walterboro S FEC ID number of contributing federal political committee. Name of Employer Self-employed Ins Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Cecilia H. Carlton, LUTCF | ccupation | | Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | Hazlehurst FEC ID number of contributing federal political committee. Name of Employer Self-employed October Self-employed October Self-employed | ccupation surance | | Transaction ID: R484587 Amount of Each Receipt this Period 42.50 Payroll Deduction |
| C. | Casper W FEC ID number of contributing federal political committee. Name of Employer Self-employed Occ Ins | ccupation surance | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| s | UBTOTAL of Receipts This Page (optional) | | ······ | 565.00 |
| Т | OTAL This Period (last page this line number only) | |) | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 30 / 173 (check only one) X |
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| Ar or | y information copied from such Reports and Stater for commercial purposes, other than using the nan | ments may ne and add | not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fintee | ancial A | dvisors Political Action Com | mit- |
| A . | Full Name (Last, First, Middle Initial) Ms. Kelli J. Carmichael, CLU, LUTCF Mailing Address 2914 S Coffman City Casper FEC ID number of contributing federal political committee. Name of Employer Self-employed | State WY C Occupation nsurance Aggregate | | Date of Receipt M M J D D J 2007 Transaction ID: R485862 Amount of Each Receipt this Period 150.00 Check |
| 3. | Self-employéd 1 | State ND C C Cccupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| D. | Self-employed I | State DE C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R485287 Amount of Each Receipt this Period 21.00 Payroll Deduction |
| s | UBTOTAL of Receipts This Page (optional) | | | 198.00 |
| Т | OTAL This Period (last page this line number only |) | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 31 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar | y information copied from such Reports and Sta for commercial purposes, other than using the n | tements may ame and add | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F | inancial A | dvisors Political Action Com | mit- |
| A . | Full Name (Last, First, Middle Initial) Mr. Mark A. Chandik, CLU, ChFC Mailing Address 42 Ritz Cove Drive City Dana Point FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: | State CA C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | Primary General Other (specify) ▼ | | 420.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Richard J. Chandik, MBA Mailing Address 1332 Shorebird Ln City Carlsbad FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State CA C Occupation Insurance Aggregate | | Date of Receipt M M M |
| - | Full Name (Last, First, Middle Initial) Ms. Queenie M. Chee, CLU, LUTCF Mailing Address 833 Waika Place City Honolulu FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State HI C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| s | UBTOTAL of Receipts This Page (optional) | | | 194.50 |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 32 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| An or | y information copied from such Reports and Stater for commercial purposes, other than using the nam | ments may ne and ado | r not be sold or used by any perso lress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fin | ancial Ad | dvisors Political Action Com | nit- |
| A. | Full Name (Last, First, Middle Initial) Mr. James R. Christensen, Jr. Mailing Address 440 Regency Pkwy Dr #13 City Omaha FEC ID number of contributing federal political committee. Name of Employer Self-employed | State NE C Decupation | | Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | Primary General Other (specify) ▼ | Aggregate | 210.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Kim L. Christenson Mailing Address 180 SW Gibson Lane City | State | Zip Code | Date of Receipt M M |
| | Issaquah FEC ID number of contributing federal political committee. | WA C | 98027-4123 | Amount of Each Receipt this Period 22.50 |
| | Name of Employer Self-employed | Occupation nsurance | | Payroll Deduction |
| D. | Full Name (Last, First, Middle Initial) Mr. James C. Clabuesch Mailing Address 11375 Fairway Dr | | | Date of Receipt |
| | City Roscommon FEC ID number of contributing federal political committee. Name of Employer | State MI C C Cocupation | Zip Code 48653 | Transaction ID: R481730 Amount of Each Receipt this Period 50.00 Payroll Deduction |
| | 4 ! | nsurance Aggregate | e Agent Year-to-Date ▼ 347.50 | |
| s | UBTOTAL of Receipts This Page (optional) | | ······ | 177.50 |
| T | OTAL This Period (last page this line number only |) | | |

| SC | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 33 / 173 | | | |
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| An | y information copied from such Reports and Stat | ements may | γ not be sold or used by any perso | n for the purpose of soliciting contributions | | | |
| or i | for commercial purposes, other than using the na | ame and add | dress of any political committee to | solicit contributions from such committee. | | | |
| | NAME OF COMMITTEE (In Full) | | | | | | |
| / | National Association of Insurance and F tee | inancial Ad | dvisors Political Action Com | nit- | | | |
| | Full Name (Last, First, Middle Initial) Ms. Cylinda A. Clark | | | Date of Receipt | | | |
| | Mailing Address 4002 San Mateo | | | 09 10 7 2007 | | | |
| | City | State | Zip Code | Transaction ID: R483375 | | | |
| | Plano | TX | 75093-6618 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | С | | 42.00 | | | |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction | | | |
| | | Insurance | | | | | |
| | Receipt For: Primary General | Aggregate | Year-to-Date ▼ | | | | |
| | Other (specify) | | 378.00 | | | | |
| 3. | Full Name (Last, First, Middle Initial) Ms. Katharine F. Clark | | | Date of Receipt | | | |
| | Mailing Address 110 Cross Creek Circle | 0 9 1 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | | |
| | City | State | Zip Code | Transaction ID: R484378 | | | |
| | Macon | GA | 31210 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | C | | 25.00 | | | |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction | | | |
| | Receipt For: | | Year-to-Date ▼ | | | | |
| | Primary General Other (specify) ▼ | | 225.00 | | | | |
| ጋ. | Full Name (Last, First, Middle Initial) Mr. Thomas R. Clark, CLU, ChFC | | | Date of Receipt | | | |
| | Mailing Address 1603 22nd St Ste 202 | | | 09 10 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | |
| | City | State | Zip Code | Transaction ID: R485013 | | | |
| | West Des Moines | IA | 50266-1410 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | С | | 60.00 | | | |
| | | | | Payroll Deduction | | | |
| | Name of Employer Self-employed | Occupation Insurance | | , | | | |
| | Receipt For: | | Year-to-Date ▼ | | | | |
| | Primary General | | | | | | |
| | Other (specify) | | 540.00 | | | | |
| SI | SUBTOTAL of Receipts This Page (optional) | | | | | | |
| т | OTAL This Period (last page this line number or | ly) | > | | | | |

| S | CHEDULE A (FEC Form 3X) | Use separate schedule(s) | FOR LINE NUMBER: PAGE 34 / 173 | | | | |
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| ıт | EMIZED RECEIPTS | or each category of the | (check only one) | | | | |
| ••• | LIVIIZED RECEII 13 | Detailed Summary Page | X 11a 11b 11c 12 15 16 17 | | | | |
| Ar | y information copied from such Reports and Statements m | av not be sold or used by any perso | | | | | |
| or | for commercial purposes, other than using the name and a | ddress of any political committee to | solicit contributions from such committee. | | | | |
| \setminus | NAME OF COMMITTEE (In Full) | | | | | | |
| | National Association of Insurance and Financial tee | Advisors Political Action Com | mit- | | | | |
| ^ | Full Name (Last, First, Middle Initial) Mr. James M. Clary | | Data of Descript | | | | |
| Α. | Mailing Address 2048 N. Burling | | Date of Receipt | | | | |
| | ZO46 IV. Builing | | 09 13 2007 | | | | |
| | City State | Zip Code | Transaction ID: R485717 | | | | |
| | <u>Chicago</u> <u>IL</u> | 60614 | Amount of Each Receipt this Period | | | | |
| | FEC ID number of contributing federal political committee. | | 250.00 | | | | |
| | Name of Employer Occupat | on | Check | | | | |
| | Self-employed Insuran | ce Agent | | | | | |
| | | te Year-to-Date ▼ | | | | | |
| | Primary General | 250.00 | 1 | | | | |
| | Other (specify) ▼ | | | | | | |
| — В. | Full Name (Last, First, Middle Initial) Mr. Edward R. Clink | | Date of Receipt | | | | |
| | Mailing Address 1263 W. Square Lake Rd. | | 09 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | |
| | City State | Zip Code | Transaction ID: R486130 | | | | |
| | Bloomfield Hills MI | 48302-0845 | Amount of Each Receipt this Period | | | | |
| | FEC ID number of contributing federal political committee. | | 75.00 | | | | |
| | Name of Employer Occupat Self-employed Incurrent | on | Credit Card | | | | |
| | Ilisuran | ce Agent | | | | | |
| | | te Year-to-Date ▼ | | | | | |
| | Primary General Other (specify) ▼ | 575.00 | | | | | |
| | Culor (opesity) V | 1 1 1 1 1 1 1 | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | |
| C. | Mr. J Michael Clinton | | Date of Receipt | | | | |
| | Mailing Address 3525 Tilford Cir | | 09 10 2007 | | | | |
| | City State | Zip Code | Transaction ID: R481935 | | | | |
| | Monroe LA | 71201 | Amount of Each Receipt this Period | | | | |
| | FEC ID number of contributing federal political committee | | 50.00 | | | | |
| | federal political committee. | | | | | | |
| | Name of Employer Occupat Self-employed Incurren | on | Payroll Deduction | | | | |
| | IIISuran | ce Agent | | | | | |
| | | te Year-to-Date ▼ | | | | | |
| | Primary General Other (specify) ▼ | 405.00 | | | | | |
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| s | SUBTOTAL of Receipts This Page (optional) | | | | | | |
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| SC | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 35 / 173 (check only one) |
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| An | y information copied from such Reports and Station commercial purposes, other than using the na | tements may ame and add | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) | | , , , , , , , , , , , , , , , , , , , | |
| \rangle | National Association of Insurance and F tee | inancial A | dvisors Political Action Com | mit- |
| | Full Name (Last, First, Middle Initial) Mr. Gordon T. Colburn | | | Date of Receipt |
| | Mailing Address 126 Crystal Springs Roa | d | | 09 10 / Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R484792 |
| | San Dimas | CA | 91773 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 42.50 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 382.50 | |
| _ | Full Name (Last, First, Middle Initial) Mr. John W. Collier, LUTCF | | | Date of Receipt |
| | Mailing Address 4600 Kietzke Lane, #134 | 09 / 10 / Y Y Y Y Y | | |
| | City | State | Zip Code | Transaction ID: R484776 |
| | Reno | NV | 89502 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.20 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 226.80 | |
| | Full Name (Last, First, Middle Initial) Mr. Jeffrey L. Collins, CLU | | | Date of Receipt |
| | Mailing Address 1109 Culpepper Drive | | | 09 / 21 / 2007 |
| | City | State | Zip Code | Transaction ID: R486061 |
| | Rocky Mount | NC | 27803-2248 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 275.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Credit Card |
| | Receipt For: | | Year-to-Date ▼ | - |
| | Primary General Other (specify) ▼ | | 550.00 | |
| SI | JBTOTAL of Receipts This Page (optional) | 342.70 | | |
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| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 36 / 173 |
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| Any information copied from such Reports and State or for commercial purposes, other than using the na | ements may | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | | ,, | |
| National Association of Insurance and Fin | nancial A | dvisors Political Action Com | mit- |
| Full Name (Last, First, Middle Initial) A. Mr. Norman A. Coltrane, LUTCF | | | Date of Receipt |
| Mailing Address 1607 Hatherleigh Drive | | | M M / D D / Y Y Y Y |
| City | State | Zip Code | 09 10 2007 |
| <u>Fayetteville</u> | NC | 28304-3643 | Transaction ID: R485127 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 60.50 |
| Name of Employer | Occupation | 1 | Payroll Deduction |
| Name of Employer Self-employed | Insurance | e Agent | |
| Receipt For: | Aggregate | Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | | 393.25 | |
| Full Name (Last, First, Middle Initial) 3. Mr. Donald L. Compton | | | Date of Receipt |
| Mailing Address 712 Forrest Dr South | 09 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | |
| City | State | Zip Code | Transaction ID: R486196 |
| Sellersburg | IN | 47172-1717 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 125.00 Credit Card |
| Name of Employer Self-employed | Occupation | | Credit Card |
| Receipt For: | Insurance | e Agent • Year-to-Date ▼ | \dashv |
| Primary General | | 375.00 | 1 |
| Other (specify) ▼ | 0 0 | 373.00 | |
| Full Name (Last, First, Middle Initial) C. Mr. Thomas M. Cothron | | | Date of Receipt |
| Mailing Address 4280 SW 20th Ave | | | M M / D D / Y Y Y Y |
| City | State | Zip Code | 0 9 2 1 2 0 0 7 Transaction ID: R486045 |
| <u>Ocala</u> | FL | 34474-5950 | Amount of Each Receipt this Period |
| FEC ID number of contributing | С | | 500.00 |
| federal political committee. | | | Credit Card |
| Name of Employer Self-employed | Occupation | | Gredit Gard |
| Receipt For: | Insurance Aggregate | e Agent • Year-to-Date ▼ | \dashv |
| Primary General | 33 3 | | 1 |
| Other (specify) ▼ | 0 0 | 750.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 685.50 |
| TOTAL This Period (last page this line number only | y) | | |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 37 / 173 (check only one) |
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| An or | y information copied from such Reports and State for commercial purposes, other than using the na | ements may ame and add | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee | nancial Ad | dvisors Political Action Com | mit- |
| ΄ Δ. | Full Name (Last, First, Middle Initial) Ms. Nancy P. Cubberley | | | Date of Receipt |
| | Mailing Address P O Box 5109 | | | 0 9 1 0 2 0 0 7 |
| | City Sevierville | State TN | Zip Code 37864 | Transaction ID: R482399 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 27.50 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 227.50 | |
| 3. | Full Name (Last, First, Middle Initial) Neil M. Cubberley, CLU,ChFC, | | | Date of Receipt |
| | Mailing Address P.O.BOX 5109 | 09 10 2007 | | |
| | City SEVIERVILLE | State TN | Zip Code 37864-5109 | Transaction ID: R485527 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 07004 0100 | 27.50 |
| | Name of Employer Self-employed | Occupation Insurance | e Agent | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 227.50 | |
|) . | Full Name (Last, First, Middle Initial) Mr. David A. Culley, CLU, ChFC | | | Date of Receipt |
| | Mailing Address 4187 Club Drive N.E. | | | 09 / 10 / Y Y Y Y Y Y |
| | City Atlanta | State GA | Zip Code 30319-1115 | Transaction ID: R485487 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 42.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 378.00 | |
| S | UBTOTAL of Receipts This Page (optional) | | | 97.00 |
| T | OTAL This Period (last page this line number onl | | | |

| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 38 / 173 | | |
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| Δ | ay information conied from such Reports and State | mente may | not be sold or used by any person | • | | |
| or | ny information copied from such Reports and State for commercial purposes, other than using the nar | me and add | lress of any political committee to | solicit contributions from such committee. | | |
| \setminus | NAME OF COMMITTEE (In Full) | | | | | |
| | National Association of Insurance and Fir tee | nancial Ac | dvisors Political Action Com | mit- | | |
| A. | Full Name (Last, First, Middle Initial) Mr. Jack H. Curtis | | | Date of Receipt | | |
| | Mailing Address 1508 Morning Glory Cr. | | | 09 10 2007 | | |
| | City | State | Zip Code | Transaction ID: R485408 | | |
| | Tupelo | MS | 38801 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | C | | 50.00 | | |
| | Self-employed | Occupation Insurance | | Payroll Deduction | | |
| | Receipt For: | | Year-to-Date ▼ | | | |
| | Primary General | | 450.00 | 1 | | |
| | Other (specify) ▼ | | 450.00 | | | |
| В. | Full Name (Last, First, Middle Initial) Mr. Vincent M. D'Addona, CLU, ChFC | | | Date of Resoirt | | |
| Ь. | Mailing Address 141 Greenway Road | | | Date of Receipt | | |
| | Walling Address 141 Greenway Hoad | | | 09 10 2007 | | |
| | City | State | Zip Code | Transaction ID: R485149 | | |
| | <u>Lido Beach</u> | NY | 11561-4828 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing | С | | 85.00 | | |
| | federal political committee. | 9 | | Payrell Deduction | | |
| | Self-employed | Occupation | | Payroll Deduction | | |
| | | Insurance | | _ | | |
| | Receipt For: Primary General | Aggregate | Year-to-Date ▼ | 1 | | |
| | Other (specify) | | 765.00 | | | |
| | | | | 4 | | |
| C. | Full Name (Last, First, Middle Initial) Mr. Steven M. Daniel, CLU, ChFC, | | | Date of Receipt | | |
| Ο. | Mailing Address 2600 Meadowbrook Dr | | | M M / D D / Y Y Y Y | | |
| | | | | 09 10 2007 | | |
| | City | State | Zip Code | Transaction ID: R485186 | | |
| | Butte | MT | 59701-4028 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | C | | 25.20 | | |
| | Name of Employer | Occupation | 1 | Payroll Deduction | | |
| | | Insurance | | | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | | | |
| Primary General Other (specify) ▼ | | ' ' | 226.80 | | | |
| | Cities (openity) | | 0 0 0 0 0 0 0 | 1 | | |
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| s | UBTOTAL of Receipts This Page (optional) | |) | 160.20 | | |
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| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 39 / 173 |
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| Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add | | | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| abla | NAME OF COMMITTEE (In Full) | | | |
| \rangle | National Association of Insurance and Finatee | ıncial A | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Mr. Charles I. Daniels, III | | | Date of Receipt |
| | Mailing Address 2424 Merlot Drive | | | 09 10 2007 |
| | • | State | Zip Code | Transaction ID: R482307 |
| | Napa | CA | 94558 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.00 |
| | Self-employed | ccupation | n e Agent | Payroll Deduction |
| | | | Year-to-Date ▼ | |
| | Primary General | iggi oguic | real to Bate 🔻 | 1 |
| | Other (specify) | | 205.00 | |
| В. | Full Name (Last, First, Middle Initial) Mr. John A. Davidson, LUTCF, FSS | | | Date of Receipt |
| | Mailing Address 1497 Rancho Lane | | | 09 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R485134 |
| | Thousand Oaks | CA | 91362 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C . | | 105.00 |
| | Self-employed 1 | ccupation | | Payroll Deduction |
| | | | Year-to-Date ▼ | |
| | Primary General | .gg. ogaic | Tour to Buto V | 1 |
| | Other (specify) ▼ | 0 0 | 995.00 | |
| <u> </u> | Full Name (Last, First, Middle Initial) Mr. William James DeBruin, LUTCF | | | Date of Receipt |
| | Mailing Address 106 Edgewood Ln | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R484666 |
| | - | WI | 54113 | Amount of Each Receipt this Period |
| | FEO ID assert as a Constitution | C ; | | 72.00 |
| | Self-employed * | ccupation | n e Agent | Payroll Deduction |
| | 4 1 | | Year-to-Date ▼ | |
| | Primary General | 39. 39410 | 10 = 0110 1 | 1 |
| | Other (specify) | 1 1 | 648.00 | |
| <u>ج</u> | UBTOTAL of Receipts This Page (optional) | | | 202.00 |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the | FOR LINE NUMBER: PAGE 40 / 173 (check only one) | |
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| An or | y information copied from such Reports and Sta for commercial purposes, other than using the r | atements may | / not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions | |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F | inancial A | dvisors Political Action Com | mit- | |
| ۷ ۹. | Full Name (Last, First, Middle Initial) Mr. Troy D. DeLair, LUTCF | | | Date of Receipt | |
| | Mailing Address 841 E 3550 N | State | Zip Code | 0 9 1 0 2 0 0 7 2 0 0 7 | |
| | North Ogden | UT | 84414-7596 | Transaction ID: R485217 Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | С | | 25.00 | |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 225.00 | | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Glenn P. Deal, Jr. | | | Date of Receipt | |
| | Mailing Address 58 Golf Course Ln. | | | | |
| | City Taylorsville | State NC | Zip Code 28681-7847 | Transaction ID: R484281 | |
| | FEC ID number of contributing federal political committee. | C | 20001-7047 | Amount of Each Receipt this Period 55.00 | |
| | Name of Employer Self-employed | Occupation Insurance | e Agent | Payroll Deduction | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 437.25 | | |
|) . | Full Name (Last, First, Middle Initial) Mr. John R. Dean, LUTCF,CLU, | | | Date of Receipt | |
| | Mailing Address 1700 S.W. 15th Ave. | | | 09 / 07 / 2007 | |
| | City Willmar | State MN | Zip Code 56201 | Transaction ID: R485582 Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | C | | 37.50 | |
| | Name of Employer Self-employed | Occupation Insurance | | Check | |
| | Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date ▼ 487.50 | | |
| SI | UBTOTAL of Receipts This Page (optional) | | | 117.50 | |
| T | OTAL This Period (last page this line number o | nlv) | | | |

| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 41 / 173 |
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| An | ny information copied from such Reports and Stat for commercial purposes, other than using the na | ements may | not be sold or used by any perso | n for the purpose of soliciting contributions |
| or \ | NAME OF COMMITTEE (In Full) | ane and add | aress or any political committee to | Solicit Continuations from Such committee. |
| \rangle | National Association of Insurance and Fitee | inancial A | dvisors Political Action Com | nit- |
| ۹. | Full Name (Last, First, Middle Initial) Mr. John R. Dean, LUTCF,CLU, | | | Date of Receipt |
| | Mailing Address 1700 S.W. 15th Ave. | | | 09 / 10 / Y Y Y Y Y Y |
| | City Willmar | State MN | Zip Code | Transaction ID: R485451 |
| | FEC ID number of contributing | | 56201 | Amount of Each Receipt this Period |
| | federal political committee. | C | | 50.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 487.50 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Lawrence P. Decker, ChFC | | | Date of Receipt |
| Mailing Address 11944 Treat Hwy | | | | 09 / 10 / Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R484095 |
| | Jasper | MI | 49248-9724 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 25.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | 225.00 | |
| | Other (specify) | | 223.00 | |
|).). | Full Name (Last, First, Middle Initial) Mr. Paul R. Decker, CLU, ChFC | | | Date of Receipt |
| | Mailing Address Box 1832 | | | M M / D D / Y Y Y Y |
| | City | State | Zip Code | 0 9 1 0 2 0 0 7 Transaction ID: R485284 |
| | Idaho Falls | ID | 83403-1832 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | С | | 50.40 |
| | federal political committee. | | | |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Receipt For: | Insurance | e Agent e Year-to-Date ▼ | - |
| | Primary General | 7 iggi ogalo | | |
| | Other (specify) ▼ | | 453.60 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 125.40 |
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| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 42 / 173 | |
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| An or | y information copied from such Reports and State for commercial purposes, other than using the na | ements may me and ado | r not be sold or used by any perso Iress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. | |
| $\overline{}$ | NAME OF COMMITTEE (In Full) | | 71 | | |
| \rangle | National Association of Insurance and Fire | nancial Ad | dvisors Political Action Com | nit- | |
| | Full Name (Last, First, Middle Initial) | | | | |
| ٩. | Mr. David V. Dellinger | | | Date of Receipt | |
| | Mailing Address 3052 Stanton Circle | | | 09 10 2007 | |
| | City | State | Zip Code | Transaction ID: R485427 | l |
| | Carmichael | CA | 95608 | Amount of Each Receipt this Period | |
| | | | 30000 | | |
| | FEC ID number of contributing federal political committee. | C | | 42.00 | |
| | Name of Employer | Occupation | 1 | Payroll Deduction | |
| | Self-employed | Insurance | | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | | |
| | Primary General Other (specify) ▼ | ''' | 378.00 | | |
| | Other (specify) | | 1 1 1 1 1 1 1 | | |
| ₹ | Full Name (Last, First, Middle Initial) Mr. Paul S. Devore, CLU, CFP(r | | | Date of Receipt | |
| ٠. | Mailing Address 11041 Sunnybrae Avenue | 2 | | M M / D D / Y Y Y Y | |
| | Trout Culling State 7 World | 09 18 2007 | | | |
| | City | State | Zip Code | Transaction ID: R485965 | |
| | Chatsworth | CA | 91311-1651 | Amount of Each Receipt this Period | |
| | FEC ID number of contributing | С | | 250.00 | |
| | federal political committee. | | | | |
| | Name of Employer Self-employed | Occupation | 1 | Credit Card | |
| | Self-employed 5 | Insurance | e Agent | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | | |
| | Primary General | ' ' | 250.00 | | |
| | Other (specify) ▼ | | 200.00 | | |
| | Full Name (Last, First, Middle Initial) Mr. David S. Dickenson, II,CLU, Ch | | | Date of Receipt | |
| | Mailing Address 7535 Brigham Road | | | M M / D D / Y Y Y Y | |
| | | | | 09 10 2007 | |
| | City | State | Zip Code | Transaction ID: R484891 | |
| | Gates Mills | OH | 44040 | Amount of Each Receipt this Period | _ |
| | FEC ID number of contributing federal political committee. | С | | 42.00 | |
| | Name of Employer | Occupation | | Payroll Deduction | _ |
| | Self-employed | Insurance | | | |
| | Receipt For: | | Year-to-Date ▼ | 1 | |
| | Primary General | | | | |
| | Other (specify) ▼ | | 378.00 | | |
| | | | | 334.00 | $\overline{}$ |
| S | UBTOTAL of Receipts This Page (optional) | | ······ | 334.00 | 닉 |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 43 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar or | y information copied from such Reports and State for commercial purposes, other than using the na | ements may | not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee | nancial A | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Ms. Rosa K. Dominy Mailing Address 4015-J Washington Rd City Martinez FEC ID number of contributing federal political committee. Name of Employer Self-employed | State GA C Occupation Insurance | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | Receipt For: Primary General Other (specify) ▼ | | e Agent e Year-to-Date ▼ 229.50 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Henry Donaghy, LUTCF,CLU, Mailing Address 400 North Church Street # 208 City Charlotte FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State NC C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R483906 Amount of Each Receipt this Period 23.10 Payroll Deduction |
| - | Full Name (Last, First, Middle Initial) Ms. Jill M. Douglass, LUTCF Mailing Address 2932 Sunstone St. City Las Vegas FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State NV C Occupation Insurance Aggregate | | Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: R484071 Amount of Each Receipt this Period 27.00 Payroll Deduction |
| s | UBTOTAL of Receipts This Page (optional) | | | 75.60 |
| T | OTAL This Period (last page this line number on | v) | > | |

| SCHEDULE A | (FEC Form 3X) CEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER (check only one) X 11a 11b 11b 13 14 | PAGE 44 / 173 11c |
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| Any information copied or for commercial purp | from such Reports and Statoses, other than using the n | tements may ame and add | r not be sold or used by any perso lress of any political committee to | on for the purpose of solic solicit contributions from | citing contributions n such committee. |
| NAME OF COMMI National Associatee | , | inancial A | dvisors Political Action Com | mit- | |
| Full Name (Last, Fi Mr. Gregory P. Dunt Mailing Address City Benicia FEC ID number of federal political con Name of Employer Self-employed | on, CIC, LUTCF 207 Riveview Terrace contributing | State CA C Occupation Insurance | | Date of Receipt O 9 Transaction ID: F Amount of Each R Credit Card | 2 0 0 7 R486154 |
| Receipt For: Primary Other (specif | General y) ▼ | | Year-to-Date ▼ 1250.00 | | |
| Full Name (Last, Fi Mr. Daniel D. Duren. Mailing Address City Lincoln | | State NE | Zip Code 68516-5428 | Date of Receipt M M / D D O 9 1 (Transaction ID: F Amount of Each R | 2 0 0 7 R483881 |
| Receipt For: Primary Other (specifical conditions) | General | Occupation Insurance Aggregate | | Payroll Deduction | 42.50 |
| Full Name (Last, Fi Mr. Thomas W. Dzik Mailing Address City St. Paul FEC ID number of federal political con Name of Employer Self-employed Receipt For: Primary Other (specif | contributing nmittee. | State MN C Occupation Insurance Aggregate | | Date of Receipt M M M / D D D O 9 10 Transaction ID: F Amount of Each R Payroll Deduction | 2 0 0 7 R483816 Receipt this Period |
| SUBTOTAL of Recei | pts This Page (optional) | | _ | | 1317.50 |
| TOTAL This Period (| last page this line number or | alv) | | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the | FOR LINE NUMBER: PAGE 45 / 173 (check only one) |
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| | LIMIZED RECEIL 13 | | Detailed Summary Page | X 11a 11b 11c 12 13 14 15 16 17 |
| An or | y information copied from such Reports and Sta for commercial purposes, other than using the r | atements may | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F | inancial A | dvisors Political Action Com | mit- |
| <u>′</u> ۵. | Full Name (Last, First, Middle Initial) Mr. Brandon K. Ebert, CMFC | | | Date of Receipt |
| | Mailing Address 2003 Marc | 2: : | 7: 0.1 | 0 9 1 0 2 0 0 7 |
| | City Salina | State KS | Zip Code 67401-6721 | Transaction ID: R482598 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 225.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Matthew Edelstein, CLU,ChFC | | | Date of Receipt |
| | Mailing Address 1550 Penstemon Ct | 09 / 10 / Y Y Y Y Y Y | | |
| | City Grayslake | State | Zip Code 60030 | Transaction ID: R482135 |
| | FEC ID number of contributing federal political committee. | C | 00030 | Amount of Each Receipt this Period 8.50 |
| | Name of Employer Self-employed | Occupation Insurance | e Agent | Payroll Deduction |
| | Receipt For: Primary General Other (specify) | Aggregate | Year-to-Date ▼ 326.50 | |
|) . | Full Name (Last, First, Middle Initial) Mr. William J. Egan, III,CFP | | | Date of Receipt |
| | Mailing Address 30 Garfield Ave | | | 09 / 13 / Y Y Y Y Y Y |
| | Avon | State NJ | Zip Code 07717-1443 | Transaction ID: R485723 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 300.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Check |
| | Receipt For: Primary General Other (specify) | Aggregate | Year-to-Date ▼ 300.00 | |
| SI | UBTOTAL of Receipts This Page (optional) | | | 333.50 |
| T | OTAL This Period (last page this line number o | nly) | | |

| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 46 / 173 | |
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| ITEMIZED RECEIPTS | | | or each category of the | (check only one) | |
| | LIMIZED RECEIP 13 | | Detailed Summary Page | X 11a 11b 11c 12 | _ |
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| An or | y information copied from such Reports and State for commercial purposes, other than using the nar | ements may me and ado | r not be sold or used by any perso Iress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. | |
| _ | NAME OF COMMITTEE (In Full) | | 7,7,1 | | _ |
| \rangle | National Association of Insurance and Fir | nancial Ad | dvisors Political Action Comr | nit- | |
| | tee | | | • | |
| | Full Name (Last, First, Middle Initial) | | | | |
| ۹. | Mr. Donald A. Eichelberger | | | Date of Receipt | |
| | Mailing Address 3217 Highway D65 | | | 09 10 2007 | |
| | City | State | Zip Code | Transaction ID: R485448 | |
| | Dysart | IA | 52224-9750 | Amount of Each Receipt this Period | |
| | FEC ID number of contributing | | | | 1 |
| | federal political committee. | C | | 50.40 | |
| | Name of Employer | Occupation | | Payroll Deduction | _ |
| | Self-employed | Insurance | | | |
| | Receipt For: | | Year-to-Date ▼ | 1 | |
| | Primary General | 00 0 | | | |
| | Other (specify) | | 453.60 | | |
| | | | | ' | |
| | Full Name (Last, First, Middle Initial) | | | Data of Bassist | |
| 3. | Mr. M. Jay Einstein, CLU Mailing Address 59 Margarete Dr. | | | Date of Receipt | |
| | Mailing Address 59 Margarete Dr. | 09 10 2007 | | | |
| | City | State | Zip Code | Transaction ID: R484861 | |
| | Pittsgrove | NJ | 08318-3015 | Amount of Each Receipt this Period | _ |
| | FEC ID number of contributing | | | 72.00 | 1 |
| | federal political committee. | C | | 72.00 | |
| | Name of Employer | Occupation | 1 | Payroll Deduction | |
| | Self-employed 1 | Insurance | | | |
| | Receipt For: | | Year-to-Date ▼ | | |
| | Primary General | | 040.00 | | |
| | Other (specify) | | 648.00 | | |
| | E-III Nove (Lost First Mills 1999) | | | | |
| Э. | Full Name (Last, First, Middle Initial) Mr. Shannon J. Enders | | | Date of Receipt | |
| | Mailing Address 5677 Westwood Drive | | | M M / D D / Y Y Y Y | |
| | | | | 09 10 2007 | |
| | City | State | Zip Code | Transaction ID: R484711 | |
| | Muskegon | MI | 49441 | Amount of Each Receipt this Period | |
| | FEC ID number of contributing | С | | 42.00 | |
| | federal political committee. | | | D. H.D. L. C. | 1 |
| | Name of Employer | Occupation | 1 | Payroll Deduction | |
| | | Insurance | | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | | |
| | Primary General Other (specify) | ' ' | 357.00 | | |
| | Cuter (Specify) 🔻 | | | | |
| | L | | | | 1 |
| S | UBTOTAL of Receipts This Page (optional) | | _ | 164.40 | |
| _ | | | | | i |
| T | OTAL This Period (last page this line number only | y) | > | | 1 |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 47 / 173 (check only one) X |
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| An or | ly information copied from such Reports and State for commercial purposes, other than using the na | ements may me and add | not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fittee | nancial A | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Mr. A. Christopher Engle, LUTCF Mailing Address 4485 Orchard Creek Ct S City Kentwood FEC ID number of contributing federal political committee. | State MI | Zip Code 49546 | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Occupation Insurance Aggregate | | Payroll Deduction |
| 3. | Full Name (Last, First, Middle Initial) Mr. A. Christopher Engle, LUTCF Mailing Address 4485 Orchard Creek Ct S E | | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R486085 |
| | Kentwood FEC ID number of contributing federal political committee. | C | 49546 | Amount of Each Receipt this Period 12.50 |
| | Name of Employer Self-employed | Occupation | e Agent | Credit Card |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 237.50 | |
| D . | Full Name (Last, First, Middle Initial) Mr. Ronald W. Erickson, CLU, AEP, Mailing Address 3002 St. Regis Rd | | | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R485022 |
| | Greensboro FEC ID number of contributing federal political committee. | NC C | 27408-4407 | Amount of Each Receipt this Period 46.75 |
| | Name of Employer Self-employed | Occupation Insurance | e Agent | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 470.25 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 84.25 |
| T | OTAL This Period (last page this line number onl | v) | | |

| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 48 / 173 |
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| | MIZED RECEIPTS | | or each category of the | (check only one) X 11a 11b 11c 12 |
| | | | Detailed Summary Page | 13 14 15 16 17 |
| Any i | information copied from such Reports and Stat r commercial purposes, other than using the na | tements may | not be sold or used by any persodress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| | AME OF COMMITTEE (In Full) | | , , , , , , , , , , , , , , , , , | |
| N | lational Association of Insurance and F | inancial A | dvisors Political Action Com | nit- |
| | ull Name (Last, First, Middle Initial) Ir. Byron Hyatt Erstad, Jr. | | | Date of Receipt |
| _ | lailing Address 2510 S Nantucket Way | | | M M / D D / Y Y Y Y |
| _ | ite., | State | Zip Code | 09 10 2007 |
| | ity Boise | State ID | 83706-5095 | Transaction ID: R485009 Amount of Each Receipt this Period |
| | EC ID number of contributing ederal political committee. | C | | 50.40 |
| N | ame of Employer | Occupation | 1 | Payroll Deduction |
| Š | ame of Employer elf-employed | Insurance | | |
| R | eceipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 453.60 | |
| | ull Name (Last, First, Middle Initial) Ir. Randy Eschels, CLU,ChFC,C | | | Date of Receipt |
| М | lailing Address 5675 Winglake Rd. | 09 / 07 / Y Y Y Y Y | | |
| | ity | State | Zip Code | Transaction ID: R485624 |
| | Bloomfield Hills | MI | 48301 | Amount of Each Receipt this Period |
| | EC ID number of contributing ederal political committee. | C | | 250.00 |
| N S | ame of Employer elf-employed | Occupation | | Check |
| _ | eceipt For: | Insurance | e Agent e Year-to-Date ▼ | - |
| | Primary General | , igg. oguio | | |
| | Other (specify) ▼ | 0 0 | 250.00 | |
| | ull Name (Last, First, Middle Initial) Ir. Stephen D. Estler, CLU, ChFC | | | Date of Receipt |
| _ | lailing Address 2177 NE 63 St. | | | M M / D D / Y Y Y Y |
| _ | | Ctoto | Zin Codo | 09 10 2007 |
| | ity Fort Lauderdale | State FL | Zip Code 33308 | Transaction ID: R485035 Amount of Each Receipt this Period |
| _ | EC ID number of contributing | | | 42.50 |
| | ederal political committee. | C | | |
| N | ame of Employer elf-employed | Occupation | | Payroll Deduction |
| _ | | Insurance | e Agent e Year-to-Date ▼ | - |
| n | eceipt For: Primary General | Aggregate | | |
| [| Other (specify) ▼ | 0 0 | 382.50 | |
| SUE | BTOTAL of Receipts This Page (optional) | | ····· | 342.90 |
| TOT | FAL This Period (last page this line number or | nlv) | • | |
| | in a mile range (last page this line number of | ·· <i>ʒ /</i> ······ | ······································ | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 49 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar or | y information copied from such Reports and Stateme for commercial purposes, other than using the name | ents may and add | not be sold or used by any perso lress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Final tee | ncial Ac | dvisors Political Action Com | mit- |
| Α. | Grand Forks FEC ID number of contributing federal political committee. Name of Employer Self-employed October 100 Per Self-employed | ccupation surance | | Date of Receipt M M J D D J 2007 Transaction ID: R485668 Amount of Each Receipt this Period 600.00 Check |
| 3. | Full Name (Last, First, Middle Initial) Mr. John Everett, LUTCF Mailing Address 531 Daniel | State | Zip Code | Date of Receipt M |
| | Santa Maria (| CA | 93454 | Amount of Each Receipt this Period 42.00 Payroll Deduction |
| | Self-employéd In: | ccupatior surance ggregate | | - Fayron Deduction |
| Full Name (Last, First, Middle Initial) Mr. Lines Robert Ferguson, Jr. Mailing Address 500 Virginia St E Ste 1100 | | | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | |
| | • | State | Zip Code | Transaction ID: R483690 |
| | FFC ID assembles of a contribution | WV | 25301-2151 | Amount of Each Receipt this Period 25.00 |
| | Self-employéd In: | ccupation surance | e Agent | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | ggregate | Year-to-Date ▼ 225.00 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 667.00 |
| Т | OTAL This Period (last page this line number only). | | | |

| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER | R: PAGE 50 / 173 |
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| ITEMIZED RECEIPTS | | | or each category of the | (check only one) | |
| ••• | LIMIZED RECEIF 13 | | Detailed Summary Page | X 11a 11b | 11c 12 |
| _ | | | | 13 14 | 15 16 17 |
| Ar or | y information copied from such Reports and St for commercial purposes, other than using the | atements may name and add | / not be sold or used by any perso dress of any political committee to | on for the purpose of so solicit contributions fro | liciting contributions om such committee. |
| | NAME OF COMMITTEE (In Full) | | , | | |
| $ \rangle$ | National Association of Insurance and tee | Financial A | dvisors Political Action Com | mit- | |
| <u>/</u> | Full Name (Last, First, Middle Initial) | | | | |
| A. | Mr. Thomas W. Ferguson, LUTCF | | | Date of Receipt | |
| | Mailing Address 33203 Euclid Avenue | | | | D / Y Y Y Y |
| | | | | | 5 2007 |
| | City | State | Zip Code | Transaction ID: | |
| | Willoughby | OH | 44094-3123 | Amount of Each | Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | | 250.00 |
| | Name of Employer | Occupation | n | Credit Card | |
| | Self-employed | Insurance | | | |
| | Receipt For: | | e Year-to-Date ▼ | | |
| | Primary General | | 050.00 | 1 | |
| | Other (specify) ▼ | | 250.00 | | |
| | | | | | |
| В. | Full Name (Last, First, Middle Initial) | | | Date of Receipt | |
| Ь. | Mrs. Rebecca J. Flickinger Mailing Address 1900 W Hart Ave | | | | |
| | Mailing Address 1900 W Hall Ave | | | | 0 2007 |
| | City | State | Zip Code | Transaction ID: | R481921 |
| | Orange | TX | 77630-3639 | | Receipt this Period |
| | FEC ID number of contributing | | | | 17.00 |
| | federal political committee. | C | | | 17.00 |
| | Name of Employer | Occupation | <u> </u> | Payroll Deduction | on |
| | Name of Employer Self-employed | Insurance | | | |
| | Receipt For: | | Year-to-Date ▼ | | |
| | Primary General | 33 -3 | | 1 | |
| | Other (specify) ▼ | 1 | 221.50 | | |
| | | | | | |
| | Full Name (Last, First, Middle Initial) | | | 5. (5.). | |
| C. | Mr. Thomas F. Flournoy, Jr.,CLU | | | Date of Receipt | |
| | Mailing Address 5300 Zebulon Rd | | | 09 1 | 0 2007 |
| | City | State | Zip Code | Transaction ID: | R484850 |
| | Macon | GA | 31210-2199 | | Receipt this Period |
| | FEC ID number of contributing | | | | 40.00 |
| | federal political committee. | | | | 42.00 |
| | | | 2 | Payroll Deduction | on |
| Self-employed Insur | | Occupation Insurance | | | |
| | | | e Year-to-Date ▼ | | |
| Primary General Other (specify) ▼ | | | | 1 | |
| | | | 378.00 | | |
| _ | | | | | |
| | | | | | 200.00 |
| s | UBTOTAL of Receipts This Page (optional) | | 309.00 | | |
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| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 51 / 173 |
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| | EMIZED RECEIPTS | | or each category of the | (check only one) X 11a 11b 11c 12 |
| | | | Detailed Summary Page | 13 14 15 16 17 |
| Ar | y information copied from such Reports and Stat for commercial purposes, other than using the na | ements may | not be sold or used by any perso | n for the purpose of soliciting contributions solicit contributions from such committee |
| <u>\</u> | NAME OF COMMITTEE (In Full) | ario ario ade | iress or arry political committee to | Solicit Contributions from Such Contributes. |
| \rangle | National Association of Insurance and Fitee | nancial A | dvisors Political Action Com | nit- |
| ۸. | Full Name (Last, First, Middle Initial) Mr. H. Larry Fortenberry, CPA,CLU,Ch | | | Date of Receipt |
| • | Mailing Address 603 Gordon PI | | | 0 9 1 0 2 0 0 7 |
| | City | State | Zip Code | Transaction ID: R484883 |
| | Madison | MS | 39110-9799 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 52.50 |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | | Insurance | e Agent • Year-to-Date ▼ | _ |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | 522.50 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. H. Larry Fortenberry, CPA,CLU,Ch | | | Date of Receipt |
| | Mailing Address 603 Gordon PI | 09 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | |
| | City | State | Zip Code | Transaction ID: R486141 |
| | Madison | MS | 39110-9799 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 50.00 |
| | Name of Employer Self-employed | Occupation | | Credit Card |
| | Receipt For: | Insurance | e Agent • Year-to-Date ▼ | - |
| | Primary General | , iggi ogaic | | |
| | Other (specify) ▼ | | 522.50 | |
| 2. | Full Name (Last, First, Middle Initial) Mr. Lawrence J. Fowler, Jr. | | | Date of Receipt |
| | Mailing Address 481 Route 82 | | | M M / D D / Y Y Y Y |
| | City | State | Zip Code | 0 9 1 0 2 0 0 7 Transaction ID: R484903 |
| | <u>Oakdale</u> | CT | 06370-1149 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 110.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | - |
| | Primary General Other (specify) ▼ | | 990.00 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 212.50 |
| т. | OTAL This Period (last page this line number on | lv) | • | |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 52 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar or | y information copied from such Reports and Statem for commercial purposes, other than using the name | nents may e and ado | not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Finatee | ancial Ad | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Mr. Thomas E. Fowler, CLU, LUTCF Mailing Address 13243 S.E. 51st Place City Bellevue FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General | State WA Ccupation nsurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| 3. | Full Name (Last, First, Middle Initial) Ms. Debra L. Franklin-Schatzki Mailing Address 380 W 12th St | 0 0 | | Date of Receipt M M |
| | New York FEC ID number of contributing federal political committee. Name of Employer Self-employed Ir | State NY C Cccupation | e Agent | Transaction ID: R485143 Amount of Each Receipt this Period 42.00 Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 378.00 | |
|). | Full Name (Last, First, Middle Initial) Mr. Robert L. French, LUTCF Mailing Address 4105 Sheridan Lake Road | | | Date of Receipt M M |
| | • | State SD | Zip Code 57702 | Transaction ID: R484521 Amount of Each Receipt this Period |
| | FEO ID combined for additional control of the state of th | C | 57702 | 30.00 |
| | Self-employed Ir | occupation nsurance Aggregate | | Payroll Deduction |
| s | UBTOTAL of Receipts This Page (optional) | | | 179.50 |
| T | OTAL This Period (last page this line number only) | | | |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 53 / 173 | | |
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| | EMIZED RECEIPTS | | or each category of the | (check only one) X 11a 11b 11c 12 | | |
| | | | Detailed Summary Page | 13 14 15 16 17 | | |
| Ar or | ny information copied from such Reports and Stat for commercial purposes, other than using the na | ements may | not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. | | |
| $\overline{}$ | NAME OF COMMITTEE (In Full) | | | | | |
| \rangle | National Association of Insurance and Fitee | nancial Ad | dvisors Political Action Com | mit- | | |
| Δ | Full Name (Last, First, Middle Initial) Mr. Bruce R. Frieden, CLU | | | Date of Receipt | | |
| •• | Mailing Address 924 King Cross | | | M M / D D / Y Y Y Y | | |
| | City | State | Zip Code | 0 9 0 7 2 0 0 7 Transaction ID: R485606 | | |
| | Virginia Beach | VA | 23452-6270 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | С | | 100.00 | | |
| | Name of Employer | Occupation | 1 | Check | | |
| | Name of Employer Self-employed | Insurance | | | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | | | |
| | Primary General Other (specify) ▼ | 0 0 | 350.00 | | | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Bruce R. Frieden, CLU | | | Date of Receipt | | |
| | Mailing Address 924 King Cross | | | 09 / 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | |
| | City | State | Zip Code | Transaction ID: R485640 | | |
| | Virginia Beach | VA | 23452-6270 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | C | | 250.00 Check | | |
| | Name of Employer Self-employed | Occupation | | Crieck | | |
| | Receipt For: | Insurance | e Agent • Year-to-Date ▼ | - | | |
| | Primary General | riggrogato | | | | |
| | Other (specify) | | 350.00 | | | |
|]. | Full Name (Last, First, Middle Initial) Mrs. Kelli Park Fuhrmann | | | Date of Receipt | | |
| | Mailing Address 647 S. Main Ave #209 | | | M M / D D / Y Y Y Y | | |
| | | Ctoto | Zin Codo | 09 10 2007 | | |
| | City Sioux Falls | State SD | Zip Code 57104 | Transaction ID: R482073 Amount of Each Receipt this Period | | |
| | FEC ID number of contributing | | | | | |
| | federal political committee. | С | | 25.00 | | |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction | | |
| | | Insurance | | _ | | |
| | Receipt For: Primary General | Aggregate | Year-to-Date ▼ | | | |
| | Other (specify) ▼ | | 225.00 | | | |
| s | SUBTOTAL of Receipts This Page (optional) | | | | | |
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| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 54 / 173 |
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| | EMIZED RECEIPTS | or each category of the | | (check only one) |
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| Ar or | ly information copied from such Reports and Sta for commercial purposes, other than using the r | atements may name and add | r not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| \setminus | NAME OF COMMITTEE (In Full) | | | |
| | National Association of Insurance and I tee | Financial Ad | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Mr. Peter Fulchiron, CLU, LUTCF | | | Date of Receipt |
| | Mailing Address 411 San Andreas Drive | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R485528 |
| | Novato | CA | 94945-1237 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 208.00 |
| | Name of Employer | Occupation | 1 | Payroll Deduction |
| | Self-employed | Insurance | e Agent | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General | 1 1 | 1872.00 | |
| | Other (specify) | 0 0 | 1072.00 | |
| В. | Full Name (Last, First, Middle Initial) Mr. James M. Fuller, LUTCF | | | Date of Receipt |
| | Mailing Address 467 Richland Ave | | | 0 9 2 0 2 0 0 7 |
| | City | State | Zip Code | Transaction ID: R486000 |
| | Athens | OH | 45701 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 125.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Credit Card |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | 0 0 | 250.00 | |
| _ | Full Name (Last, First, Middle Initial) Mr. Roger W. Garrett | | | Date of Receipt |
| Ο. | Mailing Address 2201 Woodlawn Road P O Box 370 | | | M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O |
| | City | State | Zip Code | Transaction ID: R484386 |
| | Lincoln | IL | 62656 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 25.00 |
| | Name of Employer | | | Payroll Deduction |
| | Name of Employer Self-employed | Occupation Insurance | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General Other (specify) | , , | 225.00 | |
| | □ Other (specify) ♥ | 0 0 | 1 1 1 1 1 1 1 | 1 |
| | I | | | 250.00 |
| s | UBTOTAL of Receipts This Page (optional) | | ····· | 358.00 |

| SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS |) | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 55 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Any information copied from such Reports and or for commercial purposes, other than using t | Statements may | y not be sold or used by any person dress of any political committee to | on for the purpose of soliciting contributions oslicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) National Association of Insurance ar | nd Financial A | dvisors Political Action Com | mit- |
| Full Name (Last, First, Middle Initial) Mr. Michael J. Gates, LUTCF Mailing Address 94 Pine Glen Rd. City Langhorne FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State PA C Occupatio Insuranc Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R483492 Amount of Each Receipt this Period 25.00 Payroll Deduction |
| Full Name (Last, First, Middle Initial) Mr. James O. Geitgey, LUTCF, FIC Mailing Address 279 Glenmore Dr. City Springfield FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State OH C Occupatio Insuranc Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R484943 Amount of Each Receipt this Period 42.50 Payroll Deduction |
| Full Name (Last, First, Middle Initial) Mr. Gregory Gianakis Mailing Address 5315 S Conquistado City Las Vegas FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State NV C Occupatio Insuranc | | Date of Receipt M M M / D D / Y Y Y Y Y Y Transaction ID: R481821 Amount of Each Receipt this Period 25.20 Payroll Deduction |
| SUBTOTAL of Receipts This Page (optional) | |) | 92.70 |
| TOTAL This Period (last page this line numb | er only) | | |

| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBE | R: PAGE 56 / 173 |
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| or | y information copied from such Reports and States for commercial purposes, other than using the i | name and add | dress of any political committee to | solicit contributions from | om such committee. |
| | NAME OF COMMITTEE (In Full) | | | | |
| \rangle | National Association of Insurance and Itee | Financial A | dvisors Political Action Com | mit- | |
| _ | Full Name (Last, First, Middle Initial) | | | | |
| A. | Mr. Joseph R. Giangola, CEBS | | | Date of Receipt | |
| | Mailing Address 1925 Pleasantview | | | | D / Y Y Y Y Y Y 10 10 10 10 10 10 10 10 10 10 10 10 10 |
| | City | Ctata | 7in Codo | | |
| | City Ashtabula | State OH | Zip Code | Transaction ID: | |
| | | On | 44004-9719 | Amount of Each | Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | | 25.00 |
| | Name of Employer | Occupation | า | Payroll Deducti | on |
| | Self-employed | Insurance | e Agent | | |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | | |
| | Primary General | | 225.00 | 1 | |
| | Other (specify) | | 225.00 | | |
| | | | | | |
| В. | Full Name (Last, First, Middle Initial) Mr. Steven Dwayne Gifford | | | Date of Receipt | |
| ٥. | Mailing Address P.O. Box 5027 | | | ┥ | D / Y Y Y Y |
| | Walling / Rail 500 1 . O. Box 5027 | | | | 2007 |
| | City | State | Zip Code | Transaction ID: | R483787 |
| | Ashland | KY | 41105 | | Receipt this Period |
| | FEC ID number of contributing | | 1 1 1 1 1 | | 25.20 |
| | federal political committee. | C | | | 25.20 |
| | Name of Employer | Occupation | 2 | Payroll Deducti | on |
| | Name of Employer Self-employed | Insurance | | | |
| | Receipt For: | - | Year-to-Date ▼ | | |
| | Primary General | 39 -3 | | 1 | |
| | Other (specify) ▼ | | 226.80 | | |
| | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | Data of Data dat | |
| C. | Mr. Keith M. Gillies, CLU, ChFC, Mailing Address 109 W. Lakeview Dr. | | | Date of Receipt | |
| | Mailing Address 109 W. Lakeview Dr. | | | | 10 2007 |
| | City | State | Zip Code | Transaction ID: | R484366 |
| | La Place | LA | 70068-2427 | | Receipt this Period |
| | FEC ID number of contributing | | | 1 1 1 | |
| | federal political committee. | | | | 62.50 |
| Solf omployed 1 | | Occupation | | Payroll Deducti | on |
| | | Insurance | | | |
| | - + + | | Year-to-Date ▼ | - | |
| Primary General Other (specify) ▼ | | | | 1 | |
| | | | 537.50 | | |
| _ | | | <u></u> | | |
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| s | UBTOTAL of Receipts This Page (optional) | | 112.70 | | |
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| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 57 / 173 | | | |
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| | EMIZED RECEIPTS | | or each category of the | (check only one) X 11a 11b 11c 12 | | | |
| - | | | Detailed Summary Page | X 11a 11b 11c 12 15 16 17 | | | |
| An | ny information copied from such Reports and State for commercial purposes, other than using the na | ements may | not be sold or used by any perso | n for the purpose of soliciting contributions | | | |
| or | NAME OF COMMITTEE (In Full) | une and add | aress or any political committee to | solicit contributions from such committee. | | | |
| \rangle | National Association of Insurance and Fi | nancial Ad | dvisors Political Action Com | mit- | | | |
| | Full Name (Last, First, Middle Initial) | | | Data of Descipt | | | |
| ٦. | Mr. Keith M. Gillies, CLU, ChFC, Mailing Address 109 W. Lakeview Dr. | | | Date of Receipt | | | |
| | | Ctata | Zin Code | 09 24 2007 | | | |
| | City La Place | State LA | Zip Code 70068-2427 | Transaction ID: R486155 Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing | С | 1 1 1 1 1 1 | 50.00 | | | |
| | federal political committee. | | | | | | |
| | Name of Employer Self-employed | Occupation | | Credit Card | | | |
| | Receipt For: | Insurance | e Agent e Year-to-Date ▼ | \dashv | | | |
| | Primary General | Aggregate | | 1 | | | |
| | Other (specify) ▼ | | 537.50 | | | | |
| 3. | Full Name (Last, First, Middle Initial) Constance Y. Golleher | | | Date of Receipt | | | |
| | Mailing Address PO Box 255 | | | 0 9 1 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | |
| | City | State | Zip Code | Transaction ID: R482167 | | | |
| | Mc Lean | VA | 22101 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | C | | 30.00 | | | |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction | | | |
| | Receipt For: | Insurance | e Agent e Year-to-Date ▼ | - | | | |
| | Primary General | 7.99.094.0 | | 1 | | | |
| | Other (specify) ▼ | 0 0 | 270.00 | | | | |
| | Full Name (Last, First, Middle Initial) Mr. Julian H. Good, Jr. | | | Date of Receipt | | | |
| | Mailing Address 5534 Jacquelyn Court | | | M M / D D / Y Y Y Y | | | |
| | City | State | Zip Code | 0 9 2 4 2 0 0 7 Transaction ID: R486201 | | | |
| | New Orleans | LA | 70124-1047 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing | С | | 500.00 | | | |
| | federal political committee. | | | Credit Card | | | |
| | Name of Employer Self-employed | Occupation | | Oreuit Gard | | | |
| | Receipt For: | Insurance Aggregate | e Agent e Year-to-Date ▼ | \dashv | | | |
| | Primary General | 55 19.00 | | | | | |
| | Other (specify) ▼ | | 500.00 | | | | |
| s | SUBTOTAL of Receipts This Page (optional) | | | | | | |
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| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 58 / 173 |
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| An or | y information copied from such Reports and Sta for commercial purposes, other than using the n | atements may name and add | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| \setminus | NAME OF COMMITTEE (In Full) | | | |
| \rangle | National Association of Insurance and F | Financial A | dvisors Political Action Com | mit- |
| A. | Full Name (Last, First, Middle Initial) Mr. Joel A. Goodhart, LUTCF, RFC | | | Date of Receipt |
| | Mailing Address 777 Maple Hill Dr. | | | 09 / 24 / Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R486133 |
| | Blue Bell | PA | 19422 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 250.50 |
| | Name of Employer Self-employed | Occupation | | Credit Card |
| | Receipt For: | | e Year-to-Date ▼ | |
| | Primary General | 00 0 | · · · · · · · · · · · · · · · · · · · | 7 |
| | Other (specify) ▼ | 0 0 | 250.50 | |
| В. | Full Name (Last, First, Middle Initial) Mr. James R. Goodrich, CLU, ChFC | | | Date of Receipt |
| | Mailing Address 1860 Beech | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R483624 |
| | Mt. Pleasant | MI | 48858-1280 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | 0 0 0 0 | 42.50 |
| | | | | Dayrall Daduction |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | e Year-to-Date ▼ | |
| | Primary General | 7.99.094.0 | | 1 |
| | Other (specify) ▼ | | 382.50 | |
| | Full Name (Last, First, Middle Initial) Mr. Frederick L. Granados, LUTCF, FSS | | | Date of Receipt |
| ٠. | Mailing Address 1145 Davis Avenue | | | M M / D D / Y Y Y Y |
| | 011 | 01-1- | 7's Os da | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R484350 |
| | Concord | CA | 94518 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 42.00 |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Receipt For: | | e Year-to-Date ▼ | |
| | Primary General | 1 | 298.00 | |
| | Other (specify) | | 200.00 | 1 |
| s | UBTOTAL of Receipts This Page (optional) | | | 335.00 |

| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 59 / 173 |
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| ITEMIZED RECEIPTS | | | or each category of the | (check only one) |
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| Ar or | y information copied from such Reports and Sta for commercial purposes, other than using the n | atements may name and add | r not be sold or used by any persitress of any political committee to | on for the purpose of soliciting contributions o solicit contributions from such committee. |
| \setminus | NAME OF COMMITTEE (In Full) | | | |
| | National Association of Insurance and F tee | Financial Ad | dvisors Political Action Com | mit- |
| A. | Full Name (Last, First, Middle Initial) Mr. Todd G. Grantham | | | Date of Receipt |
| | Mailing Address 203 Brandermill Drive | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R483630 |
| | Durham | NC | 27713 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 115.50 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | 400.50 | 1 |
| | Other (specify) ▼ | 0 0 | 489.50 | |
| В. | Full Name (Last, First, Middle Initial) Mr. George F. Griffin, LUTCF, CLF | | | Date of Receipt |
| | Mailing Address P.O. Box 31939 St. And | 09 10 2007 | | |
| | City | State | Zip Code | Transaction ID: R483323 |
| | Charleston | SC | 29417 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | 8 8 | 225.00 | |
| <u> </u> | Full Name (Last, First, Middle Initial) Ms. Barbara E. Gunnell, LUTCF | | | Date of Receipt |
| | Mailing Address 94903 Country Ln. | | | 0 9 1 0 2 0 0 7 |
| | City | State | Zip Code | Transaction ID: R484382 |
| | Coos Bay | OR | 97420 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | + | Year-to-Date ▼ | |
| | Primary General | | 040.00 | 1 |
| | Other (specify) | | 210.00 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 165.50 |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 60 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar or | y information copied from such Reports and Sta for commercial purposes, other than using the n | tements may ame and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F | inancial A | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Mr. Angelo Assad Haddad Mailing Address 354 Garnsey Ave City Bakersfield FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General | State CA C Occupation Insurance Aggregate | e Agent e Year-to-Date ▼ | Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| 3. | Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. William V. Hall, ChFC Mailing Address 148 Seminole Circle | 0 0 | 242.50 | Date of Receipt 0 9 2 1 2 0 0 7 |
| | City Jerome FEC ID number of contributing federal political committee. | State ID | Zip Code 83338-6484 | Transaction ID: R486075 Amount of Each Receipt this Period 270.00 |
| | Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Occupation Insurance Aggregate | | Credit Card |
| D . | Full Name (Last, First, Middle Initial) Mr. Karl Erik Hansen, CLU, ChFC, Mailing Address 900 North Shoreline Boulevard City State Zip Code Mountain View CA 94043-1933 | | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | FEC ID number of contributing federal political committee. | C | | 42.50 |
| | Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Occupation Insurance Aggregate | | Payroll Deduction |
| s | UBTOTAL of Receipts This Page (optional) | | | 355.00 |
| T | OTAL This Period (last page this line number or | nlv) | | |

| SC | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 61 / 173 |
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| An or | y information copied from such Reports and Sta for commercial purposes, other than using the n | tements may ame and add | not be sold or used by any persodress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{}$ | NAME OF COMMITTEE (In Full) | | | |
| \rangle | National Association of Insurance and F tee | inancial A | dvisors Political Action Com | mit- |
| ۹. | Full Name (Last, First, Middle Initial) Ms. Sharon L. Hansen | | | Date of Receipt |
| | Mailing Address P.O. Box 1249 1219 S Second Street | | | 09 / 10 / 2007 |
| | City | State | Zip Code | Transaction ID: R484674 |
| | Mt Vernon | WA | 98273 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 27.50 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 247.50 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Alex Hanson, CLU, ChFC, | | | Date of Receipt |
| | Mailing Address 7888 Glen Finnan Cir | 09 / 10 / Y Y Y Y Y | | |
| | City | State | Zip Code | Transaction ID: R485379 |
| | Ft Myers | FL | 33912 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 42.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 378.00 | |
| C. | Full Name (Last, First, Middle Initial) Mr. William N. Haraway | | | Date of Receipt |
| | Mailing Address 113 Fairview Ave | | | 09 / 10 / Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R485431 |
| | Frederick | MD | 21701-4017 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 42.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | 0 0 | 407.50 | |
| S | JBTOTAL of Receipts This Page (optional) | | | 111.50 |
| т | OTAL This Period (last page this line number or | nlv) | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 62 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar or | y information copied from such Reports and Stater for commercial purposes, other than using the nam | ments may ne and add | not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fin | ancial Ad | dvisors Political Action Com | nit- |
| Α. | Self-employed 1 | State MD C C Cocupation nsurance | | Date of Receipt M M M / D D / Y Y Y Y Y 0 9 2 7 2 0 0 7 Transaction ID: R486274 Amount of Each Receipt this Period 29.50 Check |
| | | | Year-to-Date ▼ 407.50 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Richard Lee Harlow, CLU,CSA,CB Mailing Address 12250 Angel Wing Ct City | State | Zip Code | Date of Receipt 0 9 1 0 2 0 0 7 |
| | Reston | VA | 20191-1102 | Transaction ID: R485113 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 42.00 |
| | Self-employed 1 | Occupation | e Agent | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 210.00 | |
| — Э. | Full Name (Last, First, Middle Initial) Ms. Linda S. Harris | | | Date of Receipt |
| | Mailing Address PO Box 261669 | | | 09 / 10 / Y Y Y Y Y Y |
| | City San Diego | State CA | Zip Code 92196-1669 | Transaction ID: R483568 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 021001000 | 22.50 |
| | Self-employed * | Occupation nsurance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) | Aggregate | Year-to-Date ▼ 202.50 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 94.00 |
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| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 63 / 173 | | |
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| | ITEMIZED RECEIPTS | | or each category of the | (check only one) | | |
| ••• | LIMIZED RECEIF 13 | | Detailed Summary Page | X 11a 11b 11c 12 | | |
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| An | y information copied from such Reports and St for commercial purposes, other than using the | atements may name and add | not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. | | |
| | NAME OF COMMITTEE (In Full) | | , , , , , , , , , , , , , , , , , , , | | _ | |
| $ \rangle$ | National Association of Insurance and tee | Financial A | dvisors Political Action Com | mit- | | |
| <u>/</u> | Full Name (Last, First, Middle Initial) | | | | _ | |
| A. | Mr. Thomas M. Hawco, CLU, ChFC | | | Date of Receipt | | |
| | Mailing Address 900 Rockhurst Drive | | | M M / D D / Y Y Y Y | | |
| | | 0 | | 09 10 2007 | | |
| | City | State | Zip Code | Transaction ID: R485155 | | |
| | Lincoln | NE | 68510-4114 | Amount of Each Receipt this Period | _ | |
| | FEC ID number of contributing federal political committee. | | | 42.50 | | |
| | Name of Employer | Occupation | า | Payroll Deduction | | |
| | Self-employed | Insurance | | | | |
| | Receipt For: | | Year-to-Date ▼ | | | |
| | Primary General | | 170,50 | 1 | | |
| | Other (specify) ▼ | | 472.50 | | | |
| | | | | | | |
| ь | Full Name (Last, First, Middle Initial) | | | Date of Baselot | | |
| В. | | | | Date of Receipt | | |
| | Mailing Address 900 Rockhurst Drive | | | 09 14 2007 | | |
| | City | State | Zip Code | Transaction ID: R485825 | | |
| | Lincoln | NE | 68510-4114 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing | C | | | 7 | |
| | federal political committee. | | | 50.00 | | |
| | · | - | | Cash | | |
| | Name of Employer Self-employed | Occupation | | | | |
| | | Insurance | | _ | | |
| | Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | | | |
| | Other (specify) | | 472.50 | | | |
| | | | 0 0 0 0 0 0 0 | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | |
| C. | Mr. Jonathan David Haymes, LUTCF | | | Date of Receipt | | |
| | Mailing Address 1230 s. hickory lane | | | 09 10 2007 | | |
| | City | State | Zip Code | Transaction ID: R484191 | | |
| | • | | 65714 | Amount of Each Receipt this Period | | |
| | | MO | 03/14 | Amount of Each Necept this Period | - | |
| | FEC ID number of contributing federal political committee. | | | 25.20 | | |
| Name of Employer Self-employed Ins Receipt For: Ag | | | | Payroll Deduction | 1 | |
| | | Occupation | | ayron beddenon | | |
| | | Insurance | - | | | |
| | | Aggregate | Year-to-Date ▼ | | | |
| Primary General Other (specify) ▼ | | | 226.80 | | | |
| | Other (specify) | | | | | |
| | | | | | _ | |
| ٩ | UBTOTAL of Receipts This Page (optional) | | | 117.70 | | |
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| + | FOTAL This Period (last page this line number only) | | | | | |

| SCHEDULE A (FEC Form 3X) | | llaa sanarata sahadula(a) | FOR LINE NUMBER: PAGE 64 / 173 | | | | |
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| ITEMIZED RECEIPTS | | or each category of the | (check only one) | | | | |
| ••• | LIMIZED RECEIL 13 | Detailed Summary Page | X 11a 11b 11c 12 15 16 17 | | | | |
| Ar | y information copied from such Reports and Statements m | ay not be sold or used by any perso | on for the purpose of soliciting contributions | | | | |
| or | for commercial purposes, other than using the name and a | ddress of any political committee to | solicit contributions from such committee. | | | | |
| | NAME OF COMMITTEE (In Full) | | | | | | |
| | National Association of Insurance and Financial Attee | mit- | | | | | |
| Α. | Full Name (Last, First, Middle Initial) Mr. Samuel H. Hazleton, IV | | Date of Receipt | | | | |
| Λ. | Mailing Address 4220 Lakeshore Drive | | M M / D D / Y Y Y Y | | | | |
| | | | 09 10 2007 | | | | |
| | City State | Zip Code | Transaction ID: R483639 | | | | |
| | Diamond Point NY | 12824 | Amount of Each Receipt this Period | | | | |
| | FEC ID number of contributing federal political committee. | | 42.00 | | | | |
| | Name of Employer Occupati | on | Payroll Deduction | | | | |
| | Self-employed Insuran | ce Agent | | | | | |
| | | te Year-to-Date ▼ | | | | | |
| | Primary General | 378.00 | 1 | | | | |
| | Other (specify) ▼ | | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | But of Busin | | | | |
| В. | Mr. Terry K. Headley, LUTCF, LIC | | Date of Receipt | | | | |
| | Mailing Address 20704 Meadow Ridge Dr | | 09 10 2007 | | | | |
| | City State | Zip Code | Transaction ID: R483549 | | | | |
| | Springfield NE | 68059-7086 | Amount of Each Receipt this Period | | | | |
| | FEC ID number of contributing federal political committee | | 208.00 | | | | |
| | federal political committee. | | | | | | |
| | Name of Employer Occupati | on | Payroll Deduction | | | | |
| | Salt-amployed | ce Agent | | | | | |
| | Receipt For: Aggrega | te Year-to-Date ▼ | | | | | |
| | Primary General | 1872.00 | 1 | | | | |
| | Other (specify) ▼ | 1072.00 | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | Patro (Parairi | | | | |
| C. | Sharon G. Heierman, CAE | | Date of Receipt | | | | |
| | Mailing Address 2990 Kemp Rd | | 09 10 2007 | | | | |
| City State | | Zip Code | Transaction ID: R482081 | | | | |
| | <u>Havana</u> <u>FL</u> | 32333 | Amount of Each Receipt this Period | | | | |
| FEC ID number of contributing federal political committee | | | 42.00 | | | | |
| | federal political committee. | | Payroll Deduction | | | | |
| | Name of Employer Occupation Self-employed Incurrent | | Payron Deduction | | | | |
| | | ce Agent | | | | | |
| | Receipt For: Aggrega Primary General | te Year-to-Date ▼ | , | | | | |
| | Other (specify) ▼ | 378.00 | | | | | |
| | | 0 0 0 0 0 0 0 | 1 | | | | |
| | IIDTOTAL of Descints This Desc (setting) | | 292.00 | | | | |
| Ls | SUBTOTAL of Receipts This Page (optional) | | | | | | |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 65 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar | y information copied from such Reports and Sta for commercial purposes, other than using the n | tements may ame and add | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F | inancial A | dvisors Political Action Com | mit- |
| <u>′</u> А. | Full Name (Last, First, Middle Initial) Mr. Steven B. Heinz Mailing Address 1341 E 600 N City Orem FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Dennis L. Helgeson, CLU,ChFC,L | State UT C Occupation Insurance Aggregate | | Date of Receipt M M J D D J D J D J D D D D D D D D D D |
| . | Mailing Address 2601 Bel Air Drive City Minot FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State ND C Occupation Insurance Aggregate | | Transaction ID: R483804 Amount of Each Receipt this Period 25.20 Payroll Deduction |
| D. | Full Name (Last, First, Middle Initial) Mr. Dean A. Hempel, FICF,LUTCF Mailing Address P O Box 1270 City Seymour FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State TN C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| s | UBTOTAL of Receipts This Page (optional) | | _ | 325.20 |
| T | OTAL This Period (last page this line number or | nlv) | | |

| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 66 / 173 |
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| TEMIZED RECEIPTS | | or each category of the | (check only one) X 11a 11b 11c 12 |
| | | Detailed Summary Page | 13 14 15 16 17 |
| Any information copied from such Reports and S or for commercial purposes, other than using the | Statements may | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | | | |
| National Association of Insurance and tee | mit- | | |
| Full Name (Last, First, Middle Initial) A. Mr. Marcus T. Henderson, Sr., LUTCF | | | Date of Receipt |
| Mailing Address 109 Barrington Court I | ====================================== | | M M / D D / Y Y Y Y |
| | | 7. 0.1. | 09 10 2007 |
| City Franklin | State TN | Zip Code 37067 | Transaction ID: R485103 Amount of Each Receipt this Period |
| FEC ID number of contributing | | 3.00. | 42.00 |
| federal political committee. | C | | |
| Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Insurance | - | |
| Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | 1 |
| Other (specify) ▼ | | 378.00 | |
| 5 W.M | | | |
| Full Name (Last, First, Middle Initial) Mr. Michael C. Herring | | | Date of Receipt |
| Mailing Address 9550 N 150th Ct | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R483396 |
| Waverly | NE | 68462-1569 | Amount of Each Receipt this Period |
| FEC ID number of contributing | С | | 22.50 |
| federal political committee. | | | |
| Name of Employer Self-employed | Occupation | | Payroll Deduction |
| Receipt For: | Insurance | e Agent e Year-to-Date ▼ | _ |
| Primary General | Aggregate | | 1 |
| Other (specify) ▼ | | 202.50 | |
| Full Name (Last, First, Middle Initial) | | | |
| Mr. Ronald G. Hester, CLU, ChFC | | | Date of Receipt |
| Mailing Address 261 New River Heights | s Rd. | | 09 10 / Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R485122 |
| Boone | NC | 28607 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | | 46.75 |
| | | | Payroll Deduction |
| Name of Employer Self-employed | Occupation | | |
| | | e Year-to-Date ▼ | |
| Primary General | | 420.75 | 1 |
| Other (specify) ▼ | | 420.73 | 1 |
| | 1 | | 111.25 |
| SUBTOTAL of Receipts This Page (optional) | | | 111.23 |
| TOTAL This Period (last page this line number | only) |) | |

| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 67 / 173 | |
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| or | y information copied from such Reports and Stat for commercial purposes, other than using the na | ements may ame and add | r not be sold or used by any personal ress of any political committee to | on for the purpose of soliciting contributions of solicit contributions from such committee. | |
| | NAME OF COMMITTEE (In Full) | | | | |
| | National Association of Insurance and F tee | inancial Ad | dvisors Political Action Com | mit- | |
| A. | Full Name (Last, First, Middle Initial) Mr. Richard L. Hill, CLU, ChFC, | | | Date of Receipt | |
| | Mailing Address 2611 Alvo Road | | | 09 10 2007 | |
| | City | State | Zip Code | Transaction ID: R485439 | |
| | Seward | NE | 68434 | Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | | | 42.00 | |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction | |
| | Receipt For: | | Year-to-Date ▼ | 1 | |
| | Primary General | | 070.00 | 1 | |
| | Other (specify) | | 378.00 | | |
| _ | Full Name (Last, First, Middle Initial) | | | B. (B.) | |
| В. | | | | Date of Receipt | |
| | Mailing Address W267 S7930 Stony Pt. C | 09 10 2007 | | | |
| | City | State | Zip Code | Transaction ID: R484203 | |
| | Mukwonago | WI | 53149-9687 | Amount of Each Receipt this Period | |
| | FEC ID number of contributing | С | | 25.20 | |
| | federal political committee. | | | | |
| | Name of Employer Self-employed | Occupation | 1 | Payroll Deduction | |
| | Self-employed 5 | Insurance | e Agent | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | | |
| | Primary General | - | 226.80 | 7 | |
| | Other (specify) ▼ | 0 0 | 0 0 0 0 0 0 0 | | |
| C. | Full Name (Last, First, Middle Initial) Mr. Tobin Carl Hoffmann, LUTCF, CFP | | | Date of Receipt | |
| • | Mailing Address 447 S Seguin Ave | | | M M / D D / Y Y Y Y | |
| | | | | 09 19 2007 | |
| | City | State | Zip Code | Transaction ID: R485887 | |
| | New Braunfels | TX | 78130-7642 | Amount of Each Receipt this Period | |
| | FEC ID number of contributing federal political committee. | С | | 250.00 | |
| | Name of Employer Self-employed | Occupation Insurance | | Check | |
| | Receipt For: | | Year-to-Date ▼ | 1 | |
| | Primary General | 1 1 | 250.00 | 7 | |
| | Other (specify) ▼ | | | | |
| | | | | 317.20 | |
| S | UBTOTAL of Receipts This Page (optional) | | | 317.20 | |
| _ | OTAL This Period (last page this line number on | lv) | 1 | | |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 68 / 173 |
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| | EMIZED RECEIPTS | | or each category of the | (check only one) X 11a |
| | | | Detailed Summary Page | 13 14 15 16 17 |
| Ar or | ly information copied from such Reports and Stat for commercial purposes, other than using the na | ements may | not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| _ | NAME OF COMMITTEE (In Full) | | , , , , , , , , , , , , , , , , , , , | |
| \rangle | National Association of Insurance and Fitee | nancial A | dvisors Political Action Com | nit- |
| Δ. | Full Name (Last, First, Middle Initial) Mr. Timothy H. Holladay | | | Date of Receipt |
| | Mailing Address 8926 Ross Ln. | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City State | | | Zip Code | Transaction ID: R485992 |
| | New Port Richey | FL | 34654 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 50.00 |
| | Name of Employer Self-employed | Occupation | 1 | Credit Card |
| | Self-employed | Insurance | - | |
| | Receipt For: Primary General | Aggregate | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 850.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Jeff L. Holland, CLU, ChFC | | | Date of Receipt |
| | Mailing Address 200 Matthew Drive | 09 / 10 / Y Y Y Y Y Y | | |
| | City | State | Zip Code | Transaction ID: R485275 |
| | Paducah | KY | 42001-6162 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 30.00 |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Receipt For: | Insurance | e Agent Year-to-Date ▼ | - |
| | Primary General | , iggi ogaio | | |
| | Other (specify) | | 270.00 | |
| . | Full Name (Last, First, Middle Initial) Mr. Robert J. Hollander, LUTCF | | | Date of Receipt |
| - | Mailing Address 904 Rockhurst Dr. | | | M M / D D / Y Y Y Y |
| | City | State | Zip Code | 09 10 2007 |
| | Lincoln | NE | 68510-4114 | Transaction ID: R484091 Amount of Each Receipt this Period |
| | FEC ID number of contributing | | | 112.50 |
| | federal political committee. | С | | |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | | Insurance | | _ |
| | Receipt For: Primary General | Aggregate | Year-to-Date ▼ | |
| | Other (specify) ▼ | | 952.50 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 192.50 |
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| 1 | OTAL This Period (last page this line number on | ıy) | | |

| S | SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 69 / 1/3 |
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| Ar | ny information copied from such Reports and Stateme | ents may | not be sold or used by any perso | |
| or | for commercial purposes, other than using the name | and add | ress of any political committee to | solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) | | | |
| \rangle | National Association of Insurance and Final tee | ncial Ad | dvisors Political Action Comr | nit- |
| ۹. | Full Name (Last, First, Middle Initial) Mr. Bryon A. Holz, CLU, ChFC, | | | Date of Receipt |
| | Mailing Address 207 Cindy Lane | | | 09 21 2007 |
| | City | State | Zip Code | Transaction ID: R486052 |
| | <u>Brandon</u> F | FL | 33510-3905 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.00 |
| | Name of Employer | ccupation | 1 | Credit Card |
| | Self-employed 1 | surance | | |
| | | | Year-to-Date ▼ | |
| | Primary General | - | 275.00 | |
| | Other (specify) ▼ | 0 0 | 273.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Richard L. Hoover, LUTCF, RIA | | | Date of Receipt |
| | Mailing Address 2920 S. Jones Blvd., #110 | | | 09 10 / Y Y Y Y Y Y |
| | City S | State | Zip Code | Transaction ID: R484054 |
| | Las Vegas | NV | 89146 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | | | 72.00 |
| | Name of Employer Oc | ccupation | <u> </u> | Payroll Deduction |
| | Self-employed 1 | surance | | |
| | Receipt For: A | ggregate | Year-to-Date ▼ | |
| | Primary General | - | 576.00 | |
| | Other (specify) ▼ | 0 0 | 370.00 | |
| ` | Full Name (Last, First, Middle Initial) | | | Date of Receipt |
| J. | Ms. Cherylyn L. Houpo Mailing Address 659 Akakuu St | | | M M / D D / Y Y Y Y |
| | Maining / Nocioco OS9 Arandu St | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R481835 |
| | <u>Wailuku</u> | <u>HI</u> | 96793 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.00 |
| | Name of Employer Oct Self-employed | ccupation | 1 | Payroll Deduction |
| | Self-employed In: | surance | e Agent | |
| | | ggregate | Year-to-Date ▼ | |
| Primary General | | | 225.00 | |
| | Other (specify) ▼ | 0 0 | | |
| s | UBTOTAL of Receipts This Page (optional) | | _ | 122.00 |
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| т | OTAL This Period (last page this line number only) | | • | |

| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE /0/1/3 |
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| Any information copied from such Reports and St or for commercial purposes, other than using the | atements ma | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) | | | |
| National Association of Insurance and tee | Financial A | dvisors Political Action Com | mit- |
| Full Name (Last, First, Middle Initial) Mr. Darrel V. Hovde | | | Date of Receipt |
| Mailing Address PO Box 1806 | | | 09 / 10 / 2007 |
| City Minot | State ND | Zip Code | Transaction ID: R483384 |
| FEC ID number of contributing federal political committee. | C | 58702-1806 | Amount of Each Receipt this Period 30.60 |
| Name of Employer Self-employed | Occupatio Insuranc | | Payroll Deduction |
| Receipt For: Primary General Other (specify) ▼ | | e Year-to-Date ▼ 270.60 | |
| Full Name (Last, First, Middle Initial) 3. Ms. April L. Howard | | | Date of Receipt |
| Mailing Address 3386 Williamsburg | 09 / 10 / Y Y Y Y Y Y | | |
| City | State ID | Zip Code | Transaction ID: R484606 |
| Boise | טו | 83706-5320 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 60.00 Payroll Deduction |
| Name of Employer Self-employed | Occupatio Insuranc | e Agent | rayion Deduction |
| Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | | 516.00 | |
| Full Name (Last, First, Middle Initial) Mr. William A. Hume, LUTCF | | | Date of Receipt |
| Mailing Address 1075 Woodfield Lane | | | 09 / 10 / Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R483416 |
| Libertyville | IL | 60048 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 42.50 |
| Name of Employer Self-employed | Occupatio Insuranc | e Agent | Payroll Deduction |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 382.50 | |
| SUBTOTAL of Receipts This Page (optional) | | | 133.10 |
| TOTAL This Period (last page this line number of | only) |) | |

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| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 71 / 173 |
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| Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add | | | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) | | , , , , , , , , , , , , , , , , , , , | |
| \rangle | National Association of Insurance and Fittee | nancial A | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Mr. Albert T. Hurst, Jr.,FICF,C | | | Date of Receipt |
| | Mailing Address 1422 Spring Street | 09 10 2007 | | |
| | City | State | Zip Code | Transaction ID: R483807 |
| | Little Rock | AR | 72202-4856 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.20 |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | | 1 |
| | Other (specify) ▼ | | 226.80 | |
| В. | Full Name (Last, First, Middle Initial) Mr. Michael Stephen Immel, LUTCF | | | Date of Receipt |
| | Mailing Address 1150 South Park Ave | | 09 21 YYYY 2007 | |
| | City | State | Zip Code | Transaction ID: R486044 |
| | Fond Du Lac | WI | 54935-8033 | Amount of Each Receipt this Period |
| | | | 0.000 0000 | Amount of Each recorpt this rende |
| | FEC ID number of contributing federal political committee. | С | | 300.00 Credit Card |
| | Name of Employer Self-employed | Occupation Insurance | | Gredit Card |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General | | | 1 |
| | Other (specify) ▼ | 0 0 | 300.00 | |
| <u> </u> | Full Name (Last, First, Middle Initial) Mr. Paul K. Improta, AAI, LUTCF | | | Date of Receipt |
| | Mailing Address 11 Highview Terrace | | | M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O |
| | City | State | Zip Code | Transaction ID: R486139 |
| | Bethel | CT | 06801-2034 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 250.00 |
| | Name of Employer Self-employed | Occupation | | Credit Card |
| | Receipt For: | | Year-to-Date ▼ | _ |
| | Primary General | .55. 55410 | = | 1 |
| | Other (specify) ▼ | | 250.00 | |
| | IIDTOTAL of Descripto This Descriptoral | | | 575.20 |
| L ^s | UBTOTAL of Receipts This Page (optional) | | ······ | |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 72 / 173 |
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| | EMIZED RECEIPTS | | or each category of the | (check only one) |
| • | EMIZED RECEIL TO | | Detailed Summary Page | X 11a 11b 11c 12 15 16 17 |
| Δr | ny information copied from such Reports and State | mente may | not be sold or used by any perso | |
| or | for commercial purposes, other than using the nar | ne and add | lress of any political committee to | solicit contributions from such committee. |
| $\overline{\ }$ | NAME OF COMMITTEE (In Full) | | | |
| \rangle | National Association of Insurance and Firtee | nancial Ad | dvisors Political Action Com | mit- |
| ۹. | Full Name (Last, First, Middle Initial) Mr. Hollis O. Inglett, Jr., LUTCF | | | Date of Receipt |
| | Mailing Address 31 Cone Rd | | | 09 10 7 2007 |
| | City | State | Zip Code | Transaction ID: R485390 |
| | Ormond Beach | FL | 32174-7903 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 42.00 |
| | Self-employed | Occupation Insurance | | Payroll Deduction |
| | | | Year-to-Date ▼ | |
| | Primary General | 1 1 | | |
| | Other (specify) ▼ | 0 0 | 378.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. William V. Irons, CLU, LUTCF | | | Date of Receipt |
| | Mailing Address 150 Prospect Rd | | | 09 10 7 2007 |
| | City | Zip Code | Transaction ID: R485117 | |
| | Wakefield | RI | 02879-7044 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.20 |
| | Name of Employer Self-employed | Occupation | 1 | Payroll Deduction |
| | | Insurance | | |
| | Receipt For: Primary General | Aggregate | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 226.80 | |
| _ | Full Name (Last, First, Middle Initial) Ms. Magenta Ishak | | | Date of Receipt |
| | Mailing Address 2901 Telestar Court | | | M M / D D / Y Y Y Y |
| | | | | 09 14 2007 |
| | City | State | Zip Code | Transaction ID: R485812 |
| | Falls Church | VA | 22042-1205 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 10.00 |
| | Self-employed 1 | Occupation Insurance | | Cash |
| | | | Year-to-Date ▼ | |
| | Primary General | | 4000.00 | |
| | Other (specify) ▼ | 0 0 | 1009.99 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 77.20 |
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| Т | OTAL This Period (last page this line number only | /) | | |

| SC | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 73 / 173 |
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| | EMIZED RECEIPTS | | or each category of the | (check only one) |
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| Any | y information copied from such Reports and State or commercial purposes, other than using the na | ements may me and add | not be sold or used by any persodress of any political committee to | n for the purpose of soliciting contributions |
| | NAME OF COMMITTEE (In Full) | | , , , , , , , , , , , , , , , , , , , | |
| \rangle | National Association of Insurance and Fitee | nancial Ad | dvisors Political Action Com | nit- |
| _ | Full Name (Last, First, Middle Initial) Ms. Magenta Ishak | | | Date of Receipt |
| | Mailing Address 2901 Telestar Court | | | M M / D D / Y Y Y Y |
| | | 01-1- | 7'- 0-4- | 09 18 2007 |
| | City Falls Church | State VA | Zip Code 22042-1205 | Transaction ID: R485853 Amount of Each Receipt this Period |
| | FEC ID number of contributing | | | 1000.00 |
| | federal political committee. | C | | |
| | Name of Employer Self-employed | Occupation | | Check |
| | | Insurance | | _ |
| | Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | |
| | Other (specify) | | 1009.99 | |
| | | | | |
| | Full Name (Last, First, Middle Initial) Mr. Greg W. Jacobs | | | Date of Receipt |
| | Mailing Address 1350 Grand Summitt Driv | ve #116 | | M M / D D / Y Y Y Y |
| | City | State | Zip Code | 0 9 1 0 2 0 0 7 Transaction ID: R482124 |
| | Reno | NV | 89523 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | | | |
| | federal political committee. | C | | 25.20 |
| | Name of Employer | Occupation | า | Payroll Deduction |
| | Self-employed * | Insurance | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 226.80 | |
| | | | 0 0 0 0 0 0 | |
| | Full Name (Last, First, Middle Initial) Mr. Richard B. Jacobs, LUTCF | | | Date of Receipt |
| | Mailing Address 5396 Painted Sunrise Dr. | | | M M / D D / Y Y Y Y |
| | City | State | Zip Code | 0 9 1 0 2 0 0 7 Transaction ID: R483554 |
| | Las Vegas | NV | 89149-6443 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | C | | 25.20 |
| | federal political committee. | | | |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Receipt For: | Insurance | e Agent e Year-to-Date ▼ | - |
| | Primary General | Aggregate | | |
| | Other (specify) | | 226.80 | |
| | | | | |
| SI | JBTOTAL of Receipts This Page (optional) | | ······ | 1050.40 |
| TC | OTAL This Period (last page this line number onl | y) |) | |
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| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 74 / 173 |
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| | EMIZED RECEIPTS | | or each category of the | (check only one) |
| •• | EMIZED RESENTS | | Detailed Summary Page | X 11a 11b 11c 12 15 16 17 |
| Δ | ny information copied from such Penerte and Stat | omonte may | y not be cold or used by any perce | |
| or | ny information copied from such Reports and Stat for commercial purposes, other than using the na | ame and ado | dress of any political committee to | osolicit contributions from such committee. |
| \setminus | NAME OF COMMITTEE (In Full) | | | |
| | National Association of Insurance and Fitee | inancial Ad | dvisors Political Action Com | mit- |
| A. | Full Name (Last, First, Middle Initial) Mr. Samuel B. James, LUTCF, SM | | | Date of Receipt |
| | Mailing Address 6410 Shady Lane | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R484003 |
| | Fayetteville | NC | 28304-3931 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 19.25 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | | 1 |
| | Other (specify) ▼ | 0 0 | 200.75 | |
| В. | Full Name (Last, First, Middle Initial) Mr. Samuel B. James, LUTCF, SM | | | Date of Receipt |
| | Mailing Address 6410 Shady Lane | | | M M / D D / Y Y Y Y |
| | | | | 09 21 2007 |
| | City | State | Zip Code | Transaction ID: R486055 |
| | Fayetteville | NC | 28304-3931 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 27.50 Credit Card |
| | Name of Employer Self-employed | Occupation | | Gredit Card |
| | Receipt For: | Insurance | e Agent • Year-to-Date ▼ | _ |
| | Primary General | Aggregate | rear-to-Date V | 1 |
| | Other (specify) ▼ | 0 0 | 200.75 | |
| <u> </u> | Full Name (Last, First, Middle Initial) Mr. Donald C. Jayne, CLU, ChFC | | | Date of Receipt |
| J . | Mailing Address 20402 Tulsa Street | | | M M / D D / Y Y Y Y |
| | | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R485050 |
| | Chatsworth | CA | 91311-1723 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 25.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | 225.00 | 1 |
| | Other (specify) | 0 0 | 225.00 | |
| | UBTOTAL of Receipts This Page (optional) | | | 71.75 |
| \vdash | ODIOTAL OF HOCOPUS (This I age (optional) | | | |
| lτ | OTAL This Period (last page this line number on | lv) | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the | FOR LINE NUMBER: PAGE 75 / 173 (check only one) |
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| | EIVIIZED NECEIP 13 | | Detailed Summary Page | X 11a 11b 11c 12 13 14 15 16 17 |
| An or | y information copied from such Reports and Sta for commercial purposes, other than using the n | tements may ame and add | not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F | inancial Ad | dvisors Political Action Com | mit- |
| _ | Full Name (Last, First, Middle Initial) | | | |
| ۹. | Mr. Jerry E. Jensen, LUTCF Mailing Address 190 So. 800 W. | | | Date of Receipt |
| | | State | Zip Code | 09 10 2007 |
| | City Blackfoot | ID | 83221-6132 | Transaction ID: R483818 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 50.40 |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Receipt For: | | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 453.60 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. John C. Johns, LUTCF | | | Date of Receipt |
| | Mailing Address 5141 Lilly Rd. | 09 10 2007 | | |
| | City | State | Zip Code | Transaction ID: R484590 |
| | Hazlehurst | MS | 39083 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 42.50 Payroll Deduction |
| | Name of Employer Self-employed | Occupation Insurance | | 1 ayron Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | 0 0 | 282.50 | |
|). | Full Name (Last, First, Middle Initial) Mr. Johnny Jon Johnson, LUTCF | | | Date of Receipt |
| | Mailing Address 3770 N Frandon Avenue | ! | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R485406 |
| | Meridian | ID | 83646 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 27.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | e Year-to-Date ▼ | |
| | Primary General | | | 1 |
| | Other (specify) | | 243.00 | |
| S | | | | 119.90 |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 76 / 173 (check only one) X 11a 11b 11c 12 |
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| _ | | | | 13 14 15 16 17 |
| An or | y information copied from such Reports and Stat for commercial purposes, other than using the na | ements may ame and add | not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee | nancial Ad | dvisors Political Action Com | mit- |
| ۹. | Full Name (Last, First, Middle Initial) Mr. Larry G. Johnson, LUTCF,CSA Mailing Address 44466 Albert | | | Date of Receipt |
| | City | State | Zip Code | 0 9 1 0 2 0 0 7 Transaction ID: R482142 |
| | Plymouth | MI | 48170 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 27.50 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 207.50 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Melville D.K. Jones | | | Date of Receipt |
| | Mailing Address P.O. Box 1391 | | | 09 / 10 / Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R483348 |
| | Puunene FEC ID number of contributing | C | 96784 | Amount of Each Receipt this Period 25.00 |
| | federal political committee. | | | Payroll Deduction |
| | Name of Employer Self-employed | Occupation Insurance | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary ☐ General Other (specify) ▼ | | 225.00 | |
| Э. | Full Name (Last, First, Middle Initial) Mr. Frederick W. Joyner | | | Date of Receipt |
| | Mailing Address 8045 Glengarriff Road | | | 0 9 / 2 4 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R486227 |
| | Clemmons | NC | 27012 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 825.00 Credit Card |
| | Name of Employer Self-employed | Occupation Insurance | | Orean Gara |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 825.00 | |
| SI | UBTOTAL of Receipts This Page (optional) | | | 877.50 |
| т | OTAL This Period (last page this line number on | ly) | | |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 77 / 173 (check only one) |
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| Ar or | y information copied from such Reports and State for commercial purposes, other than using the na | ements may me and add | not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{}$ | NAME OF COMMITTEE (In Full) | | | |
| \rangle | National Association of Insurance and Fitee | nancial Ad | dvisors Political Action Com | mit- |
| ۹. | Full Name (Last, First, Middle Initial) Mr. Terry M. Kaltenbach, CLU, ChFC | | | Date of Receipt |
| | Mailing Address 1358 Ahlrich Ave | | | 09 / 10 / Y Y Y Y Y Y |
| | City | State CA | Zip Code | Transaction ID: R484695 |
| | Encintas | CA | 92024-4029 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 125.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | 1125.00 | |
| | Other (specify) ▼ | | 1123.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Bruce H. Kantor, CLU, LUTCF | | | Date of Receipt |
| | Mailing Address 2901 Cross Country Rd | 09 10 / 10 2007 | | |
| | City | State | Zip Code | Transaction ID: R485430 |
| | Charlotte | NC | 28270-0600 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 23.10 |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | | Insurance | - | 4 |
| | Receipt For: Primary General | Aggregate | Year-to-Date ▼ | |
| | Other (specify) ▼ | | 207.90 | |
|) . | Full Name (Last, First, Middle Initial) Mr. Randall D. Kaufmann | | | Date of Receipt |
| | Mailing Address 356 Equus Drive | | | M M / D D / Y Y Y Y |
| | - | | | 09 10 2007 |
| | City Camp Hill | State PA | Zip Code 17011-8357 | Transaction ID: R484612 |
| | FEC ID number of contributing | | 17011-0337 | Amount of Each Receipt this Period |
| | federal political committee. | C | | 22.50 |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Receipt For: | Insurance | Year-to-Date V | - |
| | Primary General | 199.194.11 | | |
| | Other (specify) | | 202.50 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 170.60 |
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| T | OTAL This Period (last page this line number on | y) | > | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 78 / 173 (check only one) X 11a 11b 11c 12 |
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| An or | y information copied from such Reports and Stat for commercial purposes, other than using the na | ements may ame and add | not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee | nancial A | dvisors Political Action Com | mit- |
| ۸. | Full Name (Last, First, Middle Initial) Mr. Fred Kazmierski, CLU, LUTCF | | | Date of Receipt |
| | Mailing Address 1116 Grand Ave Ste 204 | | | 09 / 10 / 2007 |
| | City Billings | State MT | Zip Code 59102-4282 | Transaction ID: R483824 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 33102 4202 | 27.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 243.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. John B. Kearns, LUTCF | | | Date of Receipt |
| | Mailing Address 1802 First Ave | 09 / 10 / 4 7 7 7 | | |
| | City | State | Zip Code | Transaction ID: R483482 |
| | Scottsbluff FEC ID number of contributing federal political committee. | NE C | 69361 | Amount of Each Receipt this Period 42.50 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 382.50 | |
|). | Full Name (Last, First, Middle Initial) Mr. Richard E. Keeling | | | Date of Receipt |
| | Mailing Address 9507 Wessex PI | | | 09 / 10 / Y Y Y Y Y |
| | City Louisville | State KY | Zip Code 40222-5042 | Transaction ID: R483346 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 10000 | 30.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 225.00 | |
| S | UBTOTAL of Receipts This Page (optional) | | | 99.50 |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 79 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar or | y information copied from such Reports and Sta for commercial purposes, other than using the n | tements may ame and add | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F | inancial A | dvisors Political Action Com | mit- |
| A. 3. | Full Name (Last, First, Middle Initial) Mr. F. Nicholas Kelley, CLU Mailing Address 5905 S. 151 Ave Circle City Omaha FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Michael L. Kerley, JD Mailing Address 2901 Telestar Court | 0 0 | e Agent e Year-to-Date ▼ 202.50 | Date of Receipt M M / D D D / 2007 Transaction ID: R483883 Amount of Each Receipt this Period 22.50 Payroll Deduction Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City Falls Church FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | C Occupation Insurance Aggregate | | Transaction ID: R485804 Amount of Each Receipt this Period 52.25 Check |
| | Full Name (Last, First, Middle Initial) Mr. Michael L. Kerley, JD Mailing Address 2901 Telestar Court City Falls Church FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State VA C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Y Transaction ID: R486343 Amount of Each Receipt this Period 52.25 Check |
| s | UBTOTAL of Receipts This Page (optional) | | | 127.00 |
| T | OTAL This Period (last page this line number or | nlv) | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 80 / 173 (check only one) X 11a |
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| An or | y information copied from such Reports and Stat for commercial purposes, other than using the na | ements may me and add | not be sold or used by any persodress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee | nancial A | dvisors Political Action Com | mit- |
| ۹. | Full Name (Last, First, Middle Initial) Mr. Roy W. Kern, LUTCF, CLTC Mailing Address 3775 West Randall Road | l | | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R485265 |
| | Springfield FEC ID number of contributing federal political committee. | C | 65810 | Amount of Each Receipt this Period 60.00 |
| | Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Occupation Insurance Aggregate | | Payroll Deduction |
| 3. | Full Name (Last, First, Middle Initial) Mr. Roy W. Kern, LUTCF, CLTC Mailing Address 3775 West Randall Road | | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R486143 |
| | Springfield | MO | 65810 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 60.00 Credit Card |
| | Name of Employer Self-employed | Occupation | | Orean Cara |
| | Receipt For: Primary General Other (specify) ▼ | | Year-to-Date ▼ 600.00 | |
| | Full Name (Last, First, Middle Initial) Mr. Marvin R. Keys, LUTCF | | | Date of Receipt |
| | Mailing Address 8785 Inverness Place | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R485367 |
| | Tuscaloosa | AL | 35405 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 22.50 Payroll Deduction |
| | Name of Employer Self-employed | Occupation Insurance | | Fayron Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 202.50 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 142.50 |
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| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 81 / 173 |
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| Ar | ly information copied from such Reports and Sta for commercial purposes, other than using the n | tements may ame and add | not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions a solicit contributions from such committee. |
| \setminus | NAME OF COMMITTEE (In Full) | | | |
| \rangle | National Association of Insurance and F | inancial A | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Mr. Randy R. Kilgore, CLU, LUTCF | | | Date of Receipt |
| | Mailing Address 4004 San Felice Pt. | | | 09 / 19 / 2007 |
| | City | State | Zip Code | Transaction ID: R485863 |
| | Colorado Springs | CO | 80906 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 600.00 |
| | Name of Employer Self-employed | Occupation | | Check |
| | Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date ▼ 1100.00 | |
| — В. | Full Name (Last, First, Middle Initial) Mr. Thomas K. Kilton | | | Date of Receipt |
| | Mailing Address 1933 E River Pkwy | | | 09 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R485595 |
| | Minneapolis | | 55408 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 37.50 |
| | Name of Employer Self-employed | Occupation | | - Check |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 226.50 | |
| <u> </u> | Full Name (Last, First, Middle Initial) Mr. Thomas K. Kilton | | | Date of Receipt |
| | Mailing Address 1933 E River Pkwy | | 09 10 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | |
| | City | State | Zip Code | Transaction ID: R483437 |
| | Minneapolis | | 55408 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 21.00 |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 226.50 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 658.50 |

TOTAL This Period (last page this line number only)

| SC | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 82 / 173 (check only one) |
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| IT | EMIZED RECEIPTS | | or each category of the Detailed Summary Page | X 11a |
| An or | y information copied from such Reports and Stat for commercial purposes, other than using the na | ements may ame and add | not be sold or used by any persodress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F tee | inancial A | dvisors Political Action Com | mit- |
| ۸. | Full Name (Last, First, Middle Initial) Mr. Richard D. Kimmel | | | Date of Receipt |
| | Mailing Address 6525 Bellaire Drive S | | | 09 / 10 / 2007 |
| | City Ft Worth | State TX | Zip Code 76132-1138 | Transaction ID: R483538 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 1 1 1 1 1 1 | 42.00 |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date ▼ 378.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. John J. Kinkopf, LUTCF | | | Date of Receipt |
| | Mailing Address 7671 T R 455 | 09 / 04 / 7 2007 | | |
| | City Loudonville | State OH | Zip Code | Transaction ID: R481420 |
| | FEC ID number of contributing federal political committee. | C | 44842-9720 | Amount of Each Receipt this Period 250.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Credit Card |
| | Receipt For: Primary General Other (specify) | Aggregate | Year-to-Date ▼ 250.00 | |
|) . | Full Name (Last, First, Middle Initial) Mr. David G. Klemisch, LUTCF | | | Date of Receipt |
| | Mailing Address 2801 26th Ave SW | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R484048 |
| | Fargo FEC ID number of contributing federal political committee. | C | 58103 | Amount of Each Receipt this Period 51.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) | Aggregate | Year-to-Date ▼ 459.00 | |
| SI | UBTOTAL of Receipts This Page (optional) | | ······ | 343.00 |
| T | OTAL This Period (last page this line number on | ly) | | |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 83 / 173 |
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| ITEMIZED RECEIPTS | | | or each category of the | (check only one) |
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| or | y information copied from such Reports and Stat- for commercial purposes, other than using the na | ements may ame and add | r not be sold or used by any personal ress of any political committee to | on for the purpose of soliciting contributions of solicit contributions from such committee. |
| \setminus | NAME OF COMMITTEE (In Full) | | | |
| | National Association of Insurance and Fi tee | nancial Ad | dvisors Political Action Com | mit- |
| A. | Full Name (Last, First, Middle Initial) Mr. Casey C. Knake, CLU, ChFC | | | Date of Receipt |
| | Mailing Address 2902 Mach I Dr. | | | 09 / 10 / 2007 |
| | City | State | Zip Code | Transaction ID: R483815 |
| | Norfolk | NE | 68701-3238 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 42.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | 070.00 | 1 |
| | Other (specify) ▼ | | 378.00 | |
| В. | Full Name (Last, First, Middle Initial) Mr. Kenneth E. Knox, CLU, ChFC | | | Date of Receipt |
| | Mailing Address Unit 9, 10 East St | M M / D D / Y Y Y Y | | |
| | - | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R484955 |
| | Providence | RI | 02906-3069 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 50.40 |
| | rederal political committee. | | | Daywell Dadwetien |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | | Insurance | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | l ' ' | 453.60 | |
| | Other (specify) | 1 1 | | |
| C. | Full Name (Last, First, Middle Initial) Mr. Lance B. Kolbet, RHU, LUTCF | | | Date of Receipt |
| | Mailing Address 4632 Mountain Park Rd. | | | M M / D D / Y Y Y Y |
| | | | 09 10 2007 | |
| | City | State | Zip Code | Transaction ID: R485084 |
| | Pocatello | ID | 83202-1702 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 126.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | \dashv |
| | Primary General | 7.99.094.0 | | 7 |
| | Other (specify) ▼ | | 1464.00 | |
| | | | | 218.40 |
| S | UBTOTAL of Receipts This Page (optional) | | | 210.70 |
| _ | OTAL This Period (last page this line number on | lv) | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 84 / 173 (check only one) X 11a 11b 11c 12 |
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| | | | Detailed Summary Page | 13 14 15 16 17 |
| An or | y information copied from such Reports and Stat for commercial purposes, other than using the na | ements may | not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) National Association of Insurance and F tee | | | |
| _ | Full Name (Last, First, Middle Initial) | | | |
| ۹. | Mr. Lance B. Kolbet, RHU, LUTCF | | | Date of Receipt |
| | Mailing Address 4632 Mountain Park Rd. | | | 09 24 2007 |
| | City | State | Zip Code | Transaction ID: R486208 |
| | Pocatello | ID | 83202-1702 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 330.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Credit Card |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | 0 0 | 1464.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. David M. Koll, LUTCF | | | Date of Receipt |
| | Mailing Address 1612 S. 152nd Street | 09 10 2007 | | |
| | City | State | Zip Code | Transaction ID: R484507 |
| | <u>Omaha</u> | NE | 68144-5121 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 105.00 Payroll Deduction |
| | Name of Employer Self-employed | Occupation Insurance | | - Payroli Deduction |
| | Receipt For: | | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 945.00 | |
| <u> </u> | Full Name (Last, First, Middle Initial) Mr. Richard A. Koob, CLU, ChFC, | | | Date of Receipt |
| | Mailing Address 301 Frederick Street | | | 0 9 1 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R484739 |
| | Waukesha | WI | 53186-8116 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 50.40 |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Receipt For: | Insurance | e Agent e Year-to-Date ▼ | _ |
| | Primary General Other (specify) ▼ | riggrogate | 453.60 | |
| SI | UBTOTAL of Receipts This Page (optional) | | | 485.40 |
| т | OTAL This Period (last page this line number on | ly) |) | |

| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | (check only one) |
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| Any information copied from such Reports and Sta or for commercial purposes, other than using the n | tements may ame and add | not be sold or used by any perso dress of any political committee to | on tor the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | | | |
| National Association of Insurance and F tee | inancial A | dvisors Political Action Com | mit- |
| Full Name (Last, First, Middle Initial) A. Mr. David T. Koppa, CLU, LUTCF | | | Date of Receipt |
| Mailing Address 1105 Via Bolzano | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R484484 |
| Santa Barbara | CA | 93111-1053 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 42.50 |
| Name of Employer Self-employed | Occupation | 1 | Payroll Deduction |
| Self-employed | Insurance | e Agent | |
| Receipt For: | Aggregate | Year-to-Date ▼ | |
| Primary ☐ General Other (specify) ▼ | 0 0 | 382.50 | |
| Full Name (Last, First, Middle Initial) Mr. William J. Kosic, CLU, ChFC | | | Date of Receipt |
| Mailing Address 56 E 54th St | | | 09 19 2007 |
| City | State | Zip Code | Transaction ID: R485876 |
| Savannah | GA | 31405-3314 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 125.00 |
| Name of Employer Self-employed | Occupation | | Check |
| Receipt For: | Insurance | e Agent e Year-to-Date ▼ | _ |
| Primary General | Aggregate | : Teal-10-Date V | 1 |
| Other (specify) ▼ | 0 0 | 500.00 | |
| Full Name (Last, First, Middle Initial) C. Mr. Theodore G. Kotsakis | | | Date of Receipt |
| Mailing Address 1211 Forest Bay Dr | | | M M / D D / Y Y Y Y |
| City | State | Zip Code | 0 9 2 1 2 0 0 7 Transaction ID: R486036 |
| Waterford | MI | 48328 | Amount of Each Receipt this Period |
| FEC ID number of contributing | | | |
| federal political committee. | С | | 250.00 |
| Name of Employer Self-employed | Occupation | ı | Credit Card |
| | Insurance | - | 4 |
| Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | , |
| Other (specify) ▼ | | 250.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 417.50 |
| TOTAL This Period (last page this line number or | alv) | | |

| SCHEDULE A (ITEMIZED REC | | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUME (check only one) X 11a 12 13 14 | 1b |
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| Any information copied for for commercial purpos | rom such Reports and State ses, other than using the nan | ments may ne and add | not be sold or used by any perso lress of any political committee to | n for the purpose of solicit contributions | soliciting contributions from such committee. |
| NAME OF COMMIT National Associat tee | ` ' | nancial Ad | dvisors Political Action Com | mit- | |
| Full Name (Last, Firs Mr. Ben Kronish, CLU. Mailing Address 2(City New York FEC ID number of co federal political comn Name of Employer Self-employed Receipt For: Primary Other (specify) | OchFC, D5 W 89th St #2H Contributing nittee. | State NY C Occupation Insurance Aggregate | | 0 9 Transaction I | D: R484895 ch Receipt this Period |
| Full Name (Last, Firs Mr. Jon P. Kubler, LUT Mailing Address 16 City Omaha FEC ID number of content of content of the common o | ontributing nittee. | State NE C Occupation Insurance Aggregate | | Date of Recei M M M 0 9 Transaction I Amount of Ea Payroll Deduction | D: R483781 ch Receipt this Period |
| Full Name (Last, Firs Mr. Gary M. Lane, CLU Mailing Address 92 City Atlanta FEC ID number of confederal political commod Po | 25 Highland Terrance NE contributing nittee. | State GA C Occupation Insurance | | Date of Recei | D: R485511 ch Receipt this Period |
| SUBTOTAL of Receipt | s This Page (optional) | | ······ | | 70.00 |
| TOTAL This Period (la | st page this line number only | v) |) | | |

| $\mathbf{-}$ | CHEDULE A (FEC Form 3X) | | Llas concreto cobodulo(a) | FOR LINE NUMBER: PAGE 87 / 173 |
|---------------|--|---|---|---|
| | EMIZED RECEIPTS | | Use separate schedule(s) or each category of the | (check only one) |
| | EMIZED RECEIPTS | | Detailed Summary Page | X 11a 11b 11c 12 |
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| An or | y information copied from such Reports and Sta for commercial purposes, other than using the n | tements may ame and add | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{}$ | NAME OF COMMITTEE (In Full) | | | |
| \rangle | National Association of Insurance and F | inancial A | dvisors Political Action Com | mit- |
| | Full Name (Last, First, Middle Initial) Mr. Thomas R. Laster, RHU | | | Date of Receipt |
| | Mailing Address 1713 Elmhurst Ave | | | 09 10 7 2007 |
| | City | State | Zip Code | Transaction ID: R485386 |
| | Nichols Hills | OK | 73120 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 50.40 |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Receipt For: | | e Year-to-Date ▼ | _ |
| | Primary General | 7.99.094.0 | | 1 |
| | Other (specify) ▼ | 0 0 | 453.60 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Daniel L. Lawrence | | | Date of Receipt |
| | Mailing Address 5553 Peters Drive | | | 09 10 / Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R483813 |
| | West Bend | WI | 53095 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 51.00 |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Receipt For: | Insurance | e Agent e Year-to-Date ▼ | |
| | Primary General | Aggregate | rear-to-Date V | 1 |
| | ., | | 459.00 | |
| | Other (specify) | 0 0 | 100.00 | |
| | Full Name (Last, First, Middle Initial) Ms. Lynne Bates Lawrence | 0 0 | | Date of Receipt |
| | Full Name (Last, First, Middle Initial) | • • | | M M / D D / Y Y Y Y |
| Э. | Full Name (Last, First, Middle Initial) Ms. Lynne Bates Lawrence Mailing Address 1306 Riding Brook Drive | | | 09 / 10 / Y Y Y Y Y Y |
| Э. | Full Name (Last, First, Middle Initial) Ms. Lynne Bates Lawrence | State TN | Zip Code 38017-2399 | 0 9 1 0 2 0 0 7 Transaction ID: R485673 |
| Э. | Full Name (Last, First, Middle Initial) Ms. Lynne Bates Lawrence Mailing Address 1306 Riding Brook Drive City Collierville | State TN | Zip Code | Transaction ID: R485673 Amount of Each Receipt this Period |
| Э. | Full Name (Last, First, Middle Initial) Ms. Lynne Bates Lawrence Mailing Address 1306 Riding Brook Drive City | State | Zip Code | Transaction ID: R485673 Amount of Each Receipt this Period |
| Э. | Full Name (Last, First, Middle Initial) Ms. Lynne Bates Lawrence Mailing Address 1306 Riding Brook Drive City Collierville FEC ID number of contributing federal political committee. Name of Employer | State TN C | Zip Code 38017-2399 | Transaction ID: R485673 Amount of Each Receipt this Period |
| C. | Full Name (Last, First, Middle Initial) Ms. Lynne Bates Lawrence Mailing Address 1306 Riding Brook Drive City Collierville FEC ID number of contributing federal political committee. Name of Employer Self-employed | State TN C Occupation Insurance | Zip Code 38017-2399 | Transaction ID: R485673 Amount of Each Receipt this Period |
| C. | Full Name (Last, First, Middle Initial) Ms. Lynne Bates Lawrence Mailing Address 1306 Riding Brook Drive City Collierville FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: | State TN C Occupation Insurance | Zip Code 38017-2399 | Transaction ID: R485673 Amount of Each Receipt this Period |
| C. | Full Name (Last, First, Middle Initial) Ms. Lynne Bates Lawrence Mailing Address 1306 Riding Brook Drive City Collierville FEC ID number of contributing federal political committee. Name of Employer Self-employed | State TN C Occupation Insurance | Zip Code 38017-2399 | Transaction ID: R485673 Amount of Each Receipt this Period |
| C. | Full Name (Last, First, Middle Initial) Ms. Lynne Bates Lawrence Mailing Address 1306 Riding Brook Drive City Collierville FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General | State TN C Occupation Insurance | Zip Code 38017-2399 | Transaction ID: R485673 Amount of Each Receipt this Period 120.00 Check |
| C. | Full Name (Last, First, Middle Initial) Ms. Lynne Bates Lawrence Mailing Address 1306 Riding Brook Drive City Collierville FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General | State TN C Occupation Insurance Aggregate | Zip Code 38017-2399 | Transaction ID: R485673 Amount of Each Receipt this Period 120.00 Check |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 88 / 173 (check only one) X |
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| An or | y information copied from such Reports and Stat for commercial purposes, other than using the na | ements may ame and add | not be sold or used by any persodress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F tee | inancial A | dvisors Political Action Com | nit- |
| ۹. | Full Name (Last, First, Middle Initial) Robert J. Lawton Mailing Address 430 Keoniana St, #209 | | | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R486084 |
| | Honolulu | HI | 96815-2037 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 50.00 Credit Card |
| | Name of Employer Self-employed | Occupation Insurance | | Gredit Card |
| | Receipt For: Primary General Other (specify) ▼ | | Year-to-Date ▼ 250.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Leslie W. Lee, CLU, ChFC | | | Date of Receipt |
| | Mailing Address 7522 E Hampstead Ct. | | | 0 9 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R485452 |
| | Middleton | WI | 53562 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 25.20 Payroll Deduction |
| | Name of Employer Self-employed | Occupation Insurance | | Fayron Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | 0 0 | 226.80 | |
| D . | Full Name (Last, First, Middle Initial) Mr. Lanny D. Levin, CLU, ChFC | | | Date of Receipt |
| | Mailing Address 313 Laurel | | | $\begin{array}{c ccccccccccccccccccccccccccccccccccc$ |
| | City | State | Zip Code | Transaction ID: R485140 |
| | Highland Park | IL | 60035-2619 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 42.00 Payroll Deduction |
| | Name of Employer Self-employed | Occupation Insurance | | ayron beddenon |
| | Receipt For: Primary General Other (specify) | | Year-to-Date ▼ 378.00 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 117.20 |
| т. | OTAL This Period (last page this line number on | lv) | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 89 / 173 (check only one) X 11a 11b 11c 12 |
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| An | y information copied from such Reports and Stat for commercial purposes, other than using the na | tements may | not be sold or used by any persodress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F tee | | | |
| Α. | Full Name (Last, First, Middle Initial) Mr. T. Leslie Littleton, LUTCF, CLU Mailing Address 1025 E. Austin City Nacogdoches FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: | State TX C Occupation Insurance Aggregate | | Date of Receipt M M |
| | Primary General Other (specify) ▼ | 0 0 | 392.50 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Lawrence E. Lounds Mailing Address 2477 Valley Oaks Circle City Flint FEC ID number of contributing federal political committee. Name of Employer Self-employed | State MI C Occupation | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R485485 Amount of Each Receipt this Period 105.00 Payroll Deduction |
| | Receipt For: Primary General Other (specify) | Insurance Aggregate | e Agent e Year-to-Date ▼ 1100.00 | |
| C . | Full Name (Last, First, Middle Initial) Mr. Lawrence E. Lounds Mailing Address 2477 Valley Oaks Circle City State Zip Code Flint MI 48532 FEC ID number of contributing federal political committee. | | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | Name of Employer Self-employed Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ | Occupation Insurance Aggregate | | Credit Card |
| SI | UBTOTAL of Receipts This Page (optional) | | > | 307.50 |
| T | OTAL This Period (last page this line number or | nly) |) | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the | FOR LINE NUMBER: PAGE 90 / 173 (check only one) |
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| An or | y information copied from such Reports and Stat for commercial purposes, other than using the na | tements may ame and add | y not be sold or used by any persodress of any political committee to | n for the purpose of soliciting contributions |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F tee | inancial A | dvisors Political Action Com | mit- |
| ۸. | Full Name (Last, First, Middle Initial) Mrs. Patricia S. Lucas, CLU,CLTC,L | | | Date of Receipt |
| | Mailing Address 8375 Starlight Lane City | State | Zip Code | 0 9 1 0 2 0 0 7 Transaction ID: R484249 |
| | Boones Mill | VA | 24065-1909 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 42.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 378.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. William J. Lynch, LUTCF | | | Date of Receipt |
| | Mailing Address 5075 SW Griffith Dr. #20 | 09 / 10 / Y Y Y Y Y Y | | |
| | City | State OR | Zip Code | Transaction ID: R485210 |
| | Beaverton FEC ID number of contributing federal political committee. | C | 97005 | Amount of Each Receipt this Period 37.50 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date ▼ 337.50 | |
|) . | Full Name (Last, First, Middle Initial) Mr. Robert T. MacDonald | | | Date of Receipt |
| | Mailing Address 1931 N 73rd St. | | | 09 10 / 9 2007 |
| | City Wauwatosa | State WI | Zip Code 53213 | Transaction ID: R484441 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 27.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date ▼ 243.00 | |
| SI | UBTOTAL of Receipts This Page (optional) | | | 106.50 |
| T | OTAL This Period (last page this line number or | ıly) | | |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 91 / 173 |
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| | EMIZED RECEIPTS | | or each category of the | (check only one) X 11a |
| | | | Detailed Summary Page | X 11a 11b 11c 12 15 16 17 |
| Aı | ny information copied from such Reports and Sta | tements may | not be sold or used by any perso | on for the purpose of soliciting contributions |
| or | for commercial purposes, other than using the n | ame and add | dress of any political committee to | solicit contributions from such committee. |
| $ \rangle$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F | inancial Δ | dvisors Political Action Com | mit- |
| | tee | manolal 7 | avisors i ontical Action Com | |
| Α. | Full Name (Last, First, Middle Initial) Mr. Dean G. Macheras, LUTCF | | | Date of Receipt |
| Α. | Mailing Address 61 Oakwood Dr | | | M M / D D / Y Y Y Y |
| | | | | 09 24 2007 |
| | City | State | Zip Code | Transaction ID: R486131 |
| | Monroe | LA | 71203-2776 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 250.00 |
| | Name of Employer Self-employed | Occupation | n | Credit Card |
| | · · · · · · · · · · · · · · · · · · · | Insurance | - | |
| | Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | 1 |
| | Other (specify) | | 550.00 | |
| | | | | |
| В. | | | | Date of Receipt |
| | Mailing Address P. O. Box 822315 | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R485498 |
| | South Florida | FL | 33082 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 42.00 |
| | Name of Employer | Occupation | n | Payroll Deduction |
| | Name of Employer Self-employed | Insurance | | |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General | - | 378.00 | 1 |
| | Other (specify) | | | 1 |
| _ | Full Name (Last, First, Middle Initial) | | | Data of Descript |
| C. | Mr. Joseph J. Maltese, CFP Mailing Address 4176 Arikakee Court | | | Date of Receipt |
| | 4170 Alikakee Odult | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R483981 |
| | <u>Jacksonville</u> | FL | 32223 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 42.00 |
| | | I a | | Payroll Deduction |
| | Name of Employer Self-employed | Occupation | | , |
| | Receipt For: | | e Year-to-Date V | |
| | Primary General | | 070.00 | 1 |
| | Other (specify) | | 378.00 | |
| Г | | | | |
| s | SUBTOTAL of Receipts This Page (optional) | | | 334.00 |
| | OTAL This Desired (feet sees 11.1.1. | -ll | | |
| 1 1 | OTAL This Period (last page this line number or | пу) | | |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 92 / 173 |
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| | EMIZED RECEIPTS | | or each category of the | (check only one) |
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| Δn | winformation copied from such Reports and State | tomente may | y not be sold or used by any person | |
| or | y information copied from such Reports and Stat for commercial purposes, other than using the na | ame and add | lress of any political committee to | solicit contributions from such committee. |
| \setminus | NAME OF COMMITTEE (In Full) | | | |
| | National Association of Insurance and F tee | inancial Ac | dvisors Political Action Com | mit- |
| A. | Full Name (Last, First, Middle Initial) Mr. Dale F. Mamele, CLU | | | Date of Receipt |
| | Mailing Address 111 Old Home Pl. | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R484527 |
| | Columbia | SC | 29212-2051 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.00 |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | 225.00 | 1 |
| | Other (specify) ▼ | 0 0 | 225.00 | |
| В. | Full Name (Last, First, Middle Initial) Mr. Leonard Martin, CSA | | | Date of Receipt |
| | Mailing Address 98 Tennyson Rd | | | M M / D D / Y Y Y Y |
| | Oth. | Otata | 7in Onda | 09 10 2007 |
| | City Warwick | State RI | Zip Code 02888 | Transaction ID: R484433 |
| | | - NI | 02000 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 50.40 |
| | Name of Familian | 0 | | Payroll Deduction |
| | Name of Employer Self-employed | Occupation Insurance | | |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | 450.00 | 1 |
| | Other (specify) ▼ | 0 0 | 453.60 | |
| C. | Full Name (Last, First, Middle Initial) Mr. Roosevelt Maske, LUTCF | | | Date of Receipt |
| | Mailing Address 5515 Fairvista Drive | | | M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O |
| | City | State | Zip Code | Transaction ID: R486093 |
| | Charlotte | NC | 28269-0633 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | | | |
| | federal political committee. | C | | 275.00 |
| | Name of Employer | Occupation | 1 | Credit Card |
| | Self-employed * | Insurance | e Agent | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | Primary General Other (specify) | ' ' | 556.60 | 1 |
| | Citiei (specify) | | | 1 |
| | | | | |
| S | JBTOTAL of Receipts This Page (optional) | |) | 350.40 |
| T. | OTAL This Period (last page this line number or | nlv) | | |

| U (| CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 93 / 173 (check only one) |
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| An or | y information copied from such Reports and Sta for commercial purposes, other than using the r | tements may | not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F | inancial A | dvisors Political Action Com | mit- |
| ΄ Δ. | Full Name (Last, First, Middle Initial) Mr. Darren Scott Mason, CLU, ChFC | | | Date of Receipt |
| | Mailing Address 178 Shorecliff Rd | | | 09 10 7 2007 |
| | City | State | Zip Code | Transaction ID: R484945 |
| | Corona Del Mar | CA | 92625-2648 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 41.66 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 374.94 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Douglas B. Massey, CLU, ChFC, | | | Date of Receipt |
| | Mailing Address 3115 Southwest Blvd. | | | 09 / 10 / Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R485118 |
| | San Angelo | TX | 76904-5772 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 42.50 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | D.: | | | |
| | Primary General Other (specify) ▼ | | 226.00 | |
| C. | | | 226.00 | Date of Receipt |
| - . | Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Carl James Maus, LUTCF Mailing Address 432 Fort Saratoga | | | 0 9 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| D . | Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Carl James Maus, LUTCF Mailing Address 432 Fort Saratoga City | State | Zip Code | 0 9 1 0 2 0 0 7 Transaction ID: R485446 |
| C. | Other (specify) Full Name (Last, First, Middle Initial) Mr. Carl James Maus, LUTCF Mailing Address 432 Fort Saratoga City Saint Charles | State MO | | 0 9 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| C . | Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Carl James Maus, LUTCF Mailing Address 432 Fort Saratoga City | | Zip Code | Transaction ID: R485446 Amount of Each Receipt this Period 50.40 |
| D . | Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Carl James Maus, LUTCF Mailing Address 432 Fort Saratoga City Saint Charles FEC ID number of contributing | MO C Occupation | Zip Code 63303-1766 | Transaction ID: R485446 Amount of Each Receipt this Period |
| D. | Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Carl James Maus, LUTCF Mailing Address 432 Fort Saratoga City Saint Charles FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: | C Occupation Insurance | Zip Code 63303-1766 | Transaction ID: R485446 Amount of Each Receipt this Period 50.40 |
| C . | Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Carl James Maus, LUTCF Mailing Address 432 Fort Saratoga City Saint Charles FEC ID number of contributing federal political committee. Name of Employer Self-employed | C Occupation Insurance | Zip Code 63303-1766 | Transaction ID: R485446 Amount of Each Receipt this Period 50.40 |
| S. | Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Carl James Maus, LUTCF Mailing Address 432 Fort Saratoga City Saint Charles FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General | C Occupation Insurance Aggregate | Zip Code 63303-1766 | Transaction ID: R485446 Amount of Each Receipt this Period 50.40 Payroll Deduction |

| SC | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 94 / 173 |
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| | EMIZED RECEIPTS | | or each category of the | (check only one) |
| • | | | Detailed Summary Page | X 11a 11b 11c 12 17 13 14 15 16 17 |
| An | y information copied from such Reports and State for commercial purposes, other than using the na | ements may | not be sold or used by any persodress of any political committee to | n for the purpose of soliciting contributions |
| _ | NAME OF COMMITTEE (In Full) | | , , , , , , , , , , , , , , , , , , , | |
| \rangle | National Association of Insurance and Fitee | nancial A | dvisors Political Action Comr | nit- |
| ۹. | Full Name (Last, First, Middle Initial) Mr. Michael V. May, CLU, ChFC, | | | Date of Receipt |
| | Mailing Address P O Box 910 | | | 09 10 7 2007 |
| | City | State | Zip Code | Transaction ID: R483767 |
| | Port Richey | <u>FL</u> | 34673-0910 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 25.00 |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Receipt For: | | e Year-to-Date ▼ | - |
| | Primary General Other (specify) ▼ | 199 - 9 - 1 | 225.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Michael S. McCaffrey, LUTCF | | | Date of Receipt |
| | Mailing Address 1965 Yosemite Suite 120 | | | 0 9 / 2 4 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R486202 |
| | Simi Valley | CA | 93063-5220 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 125.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Credit Card |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | 250.00 | |
| | Other (specify) ▼ | | 250.00 | |
| Э. | Full Name (Last, First, Middle Initial) Mr. J. Edward McClendon, LUTCF | | | Date of Receipt |
| | Mailing Address 4951 State Route #60. N | | | 09 / 18 / Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R485850 |
| | Wakeman | OH | 44889-8605 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 250.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Check |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 500.00 | |
| SI | JBTOTAL of Receipts This Page (optional) | | | 400.00 |
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| | OF COMMITTEE (In Full) | | | | |
| \ | al Association of Insurance and F | inancial Ad | dvisors Political Action Com | mit- | |
| | ne (Last, First, Middle Initial) n Cole McConathy | | | Date of Receipt | |
| Mailing A | Address 607 Kendal Ridge | | | 0 9 1 0 | 2007 |
| City | | State | Zip Code | Transaction ID: R4 | 481876 |
| Monroe | 9 | LA | 71201 | Amount of Each Re | ceipt this Period |
| | number of contributing olitical committee. | C | | | 22.50 |
| Name of Self-emi | Employer ployed | Occupation | | Payroll Deduction | |
| | | Insurance | e Agent • Year-to-Date ▼ | - | |
| Receipt Pr | mary General | Aggregate | | ı | |
| | her (specify) ▼ | | 202.50 | | |
| | ne (Last, First, Middle Initial) es L. McConathy, Jr. | | | Date of Receipt | |
| Mailing A | Address 706 Trenton St., Apt. 6 | | | 09 10 | 2007 |
| City | | State | Zip Code | Transaction ID: R | |
| West N | | LA | 71291 | Amount of Each Re | ceipt this Period |
| | number of contributing olitical committee. | C | | Daywell D. J. C. | 50.00 |
| Name of Self-emi | Employer bloyed | Occupation | | Payroll Deduction | |
| Receipt | | Insurance | e Agent • Year-to-Date ▼ | _ | |
| | imary General | Aggregate | | 1 | |
| Ot | her (specify) ▼ | | 450.00 | | |
| | ne (Last, First, Middle Initial) Y. McNeely, LUTCF,CFP | | | Date of Receipt | |
| | Address S764 Hanson Road | | | M M / D D D D D D D D D D D D D D D D D | 2007 |
| City | | State | Zip Code | Transaction ID: R | |
| Spence | er | WI | 54479 | Amount of Each Re | |
| | number of contributing | С | | | 51.00 |
| federal p | olitical committee. | | | | 31.00 |
| Name of Self-em | Employer ployed | Occupation | | Payroll Deduction | |
| | | Insurance | | _ | |
| Receipt Pr | For: imary General | Aggregate | Year-to-Date ▼ | . | |
| | her (specify) ▼ | | 354.00 | | |
| SUBTOTA | L of Receipts This Page (optional) | | ······ | | 123.50 |
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| | NAME OF COMMITTEE (In Full) | iairie ailu auc | diess of any political committee to | Solicit contributions from such committee. |
| | National Association of Insurance and I | Einanaial A | duicara Political Action Com | mit |
| \angle | tee | IIIaiiciai A | UVISOIS FOIILICAI ACLIOIT COITI | |
| Α. | Full Name (Last, First, Middle Initial) Mr. Thomas D. McNeil | | | Date of Receipt |
| | Mailing Address 49 Hagen Oaks Ct | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R484372 |
| | Alamo | CA | 94507 | Amount of Each Receipt this Period |
| | | | J-507 | Amount of Lacif Necelpt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.00 |
| | Name of Employer | Occupation | 1 | Payroll Deduction |
| | Self-employed | Insurance | | |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | 1 | 005.00 | 1 |
| | Other (specify) ▼ | 0 0 | 225.00 | |
| | | | | |
| В. | Full Name (Last, First, Middle Initial) Mr. Thomas Owen Michel, CEO | | | Date of Receipt |
| ٥. | Mailing Address 16880 Avenida De Sant | a Ynez | | M M / D D / Y Y Y Y |
| | | a 11102 | | 09 21 2007 |
| | City | State | Zip Code | Transaction ID: R486037 |
| | Pacific Palisades | CA | 90272-2127 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | | | 500.00 |
| | federal political committee. | C | | 300.00 |
| | Name of Employer | Occupation | 1 | Credit Card |
| | Name of Employer Self-employed | Insurance | | |
| | Receipt For: | + | Year-to-Date ▼ | |
| | Primary General | | F00.00 | 1 |
| | Other (specify) ▼ | | 500.00 | |
| | Full Name (Last, First, Middle Initial) | | | + |
| C. | Mr. David A. Middaugh, CLU, AEP | | | Date of Receipt |
| | Mailing Address 3273 Evergreen Road | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R485444 |
| | Fargo | ND | 58102-1214 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | | | 126.00 |
| | federal political committee. | C | | |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | | Insurance | | |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) | | 1134.00 | |
| | ☐ Other (specify) ▼ | | | 1 |
| | | | | |
| 9 | UBTOTAL of Receipts This Page (optional) | | | 651.00 |
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| 0 | CHEDIII E A /EEC Form 2V) | | | FOR LINE NUMBER: PAGE 97 / 173 | | |
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| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | | (check only one) | | |
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| <u>~</u> | NAME OF COMMITTEE (In Full) | name and add | political committee to | o donore donumbations from addit committee. | | |
| $ \rangle$ | National Association of Insurance and I | Financial Ad | dvisors Political Action Com | mit- | | |
| A . | Full Name (Last, First, Middle Initial) Mr. Jason Middaugh | | | Date of Receipt | | |
| | Mailing Address 3307 Maple Street | | | 0 9 2 4 2 0 0 7 | | |
| | City | State | Zip Code | Transaction ID: R486176 | | |
| | Fargo | ND | 58102-1230 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | C | | 300.00 | | |
| | Name of Employer Self-employed | Occupation | | Credit Card | | |
| | Receipt For: Primary General | | e Year-to-Date ▼ | | | |
| | Primary General Other (specify) ▼ | | 300.00 | | | |
| — В. | Full Name (Last, First, Middle Initial) Mrs. Krisann K. Miehe, CSA | | | Date of Receipt | | |
| ٠. | Mailing Address 2519 Galahad Way | | | M M / D D / Y Y Y Y Y Y O O O O O O O O O O O O O | | |
| | City | State | Zip Code | Transaction ID: R485718 | | |
| | Janesville | WI | 53548-1499 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | C | | 60.00 | | |
| | Name of Employer Self-employed | Occupation Insurance | | Check | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | | | |
| | Primary General Other (specify) ▼ | | 360.00 | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Mr. Michael J. Milburn, LUTCF | | | Date of Receipt | | |
| | Mailing Address 2332 Flagstaff Dr. | | | 09 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | |
| | City | State | Zip Code | Transaction ID: R483788 | | |
| | Longmont | CO | 80501 | Amount of Each Receipt this Period | | |
| | FEC ID number of contributing federal political committee. | C | | 22.50 | | |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction | | |
| | Receipt For: | | e Year-to-Date ▼ | | | |
| | Primary General Other (specify) ▼ | | 202.50 | | | |
| s | UBTOTAL of Receipts This Page (optional) | | | 382.50 | | |
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| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 98 / 173 |
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| or | y information copied from such Reports and Sta for commercial purposes, other than using the i | atements may name and add | r not be sold or used by any pers dress of any political committee to | on for the purpose of soliciting contributions of solicit contributions from such committee. |
| \setminus | NAME OF COMMITTEE (In Full) | | | |
| | National Association of Insurance and lee | Financial Ad | dvisors Political Action Com | ımit- |
| A. | Full Name (Last, First, Middle Initial) Mr. Anthony D. Miller, CLU, ChFC, | | | Date of Receipt |
| | Mailing Address 4502 Hi-Line Dr | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R484767 |
| | Billings | MT | 59106 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 50.40 |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | | 7 |
| | Other (specify) | 0 0 | 364.80 | |
| В. | Full Name (Last, First, Middle Initial) Ms. Carolyn S. Miller, LUTCF | | | Date of Receipt |
| | Mailing Address 2469 W. Rosebush Rd | | | 0 9 1 0 Y Y Y Y Y Y |
| | City | State | Zip Code | T .: ID D494996 |
| | • | | Zip Oodc | Transaction ID: 11404230 |
| | Weidman | MI | 48893-9791 | Transaction ID: R484236 Amount of Each Receipt this Period |
| | Weidman FEC ID number of contributing federal political committee. | C | • | Amount of Each Receipt this Period 21.00 |
| | FEC ID number of contributing federal political committee. | C | 48893-9791 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. Name of Employer Self-employed | Occupation Insurance | 48893-9791 ne Agent | Amount of Each Receipt this Period 21.00 |
| | FEC ID number of contributing federal political committee. | Occupation Insurance | 48893-9791 | Amount of Each Receipt this Period 21.00 |
| | FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: | Occupation Insurance | 48893-9791 ne Agent | Amount of Each Receipt this Period 21.00 |
| | FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) | Occupation Insurance | 48893-9791 A pe Agent Year-to-Date ▼ | Amount of Each Receipt this Period 21.00 Payroll Deduction |
| c. | FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | Occupation Insurance | 48893-9791 A pe Agent Year-to-Date ▼ | Amount of Each Receipt this Period 21.00 Payroll Deduction Date of Receipt |
| C. | FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Carolyn S. Miller, LUTCF Mailing Address 2469 W. Rosebush Rd | Occupation Insurance Aggregate | 48893-9791 A Agent Year-to-Date ▼ 218.00 | Amount of Each Receipt this Period 21.00 Payroll Deduction Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| c. | FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Carolyn S. Miller, LUTCF Mailing Address 2469 W. Rosebush Rd City | Occupation Insurance | 48893-9791 De Agent Year-to-Date ✓ Zip Code | Payroll Deduction Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| c. | FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Carolyn S. Miller, LUTCF Mailing Address 2469 W. Rosebush Rd City Weidman | Occupation Insurance Aggregate | 48893-9791 A Agent Year-to-Date ▼ 218.00 | Amount of Each Receipt this Period 21.00 Payroll Deduction Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| C. | FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Carolyn S. Miller, LUTCF Mailing Address 2469 W. Rosebush Rd City | Occupation Insurance Aggregate | 48893-9791 De Agent Year-to-Date ✓ Zip Code | Amount of Each Receipt this Period 21.00 Payroll Deduction Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| C. | FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Carolyn S. Miller, LUTCF Mailing Address 2469 W. Rosebush Rd City Weidman FEC ID number of contributing federal political committee. Name of Employer | Occupation Insurance Aggregate State MI C | 48893-9791 De Agent P Year-to-Date ▼ 218.00 Zip Code 48893-9791 | Amount of Each Receipt this Period 21.00 Payroll Deduction Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| c. | FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Carolyn S. Miller, LUTCF Mailing Address 2469 W. Rosebush Rd City Weidman FEC ID number of contributing federal political committee. Name of Employer Self-employed | C Occupation Insurance Aggregate State MI C Occupation Insurance | 48893-9791 P. Agent 218.00 Zip Code 48893-9791 | Amount of Each Receipt this Period 21.00 Payroll Deduction Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| c. | FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Carolyn S. Miller, LUTCF Mailing Address 2469 W. Rosebush Rd City Weidman FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: | C Occupation Insurance Aggregate State MI C Occupation Insurance | 48893-9791 De Agent P Year-to-Date ▼ 218.00 Zip Code 48893-9791 | Amount of Each Receipt this Period 21.00 Payroll Deduction Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| C. | FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Carolyn S. Miller, LUTCF Mailing Address 2469 W. Rosebush Rd City Weidman FEC ID number of contributing federal political committee. Name of Employer Self-employed | C Occupation Insurance Aggregate State MI C Occupation Insurance | 48893-9791 P. Agent 218.00 Zip Code 48893-9791 | Amount of Each Receipt this Period 21.00 Payroll Deduction Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Carolyn S. Miller, LUTCF Mailing Address 2469 W. Rosebush Rd City Weidman FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) General | C Occupation Insurance Aggregate MI C Occupation Insurance Aggregate Aggregate | 48893-9791 2 Agent 2 Year-to-Date ▼ 218.00 Zip Code 48893-9791 Agent 2 Agent Year-to-Date ▼ 218.00 | Amount of Each Receipt this Period 21.00 Payroll Deduction Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Carolyn S. Miller, LUTCF Mailing Address 2469 W. Rosebush Rd City Weidman FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General | C Occupation Insurance Aggregate MI C Occupation Insurance Aggregate Aggregate | 48893-9791 2 Agent 2 Year-to-Date ▼ 218.00 Zip Code 48893-9791 Agent 2 Agent Year-to-Date ▼ 218.00 | Amount of Each Receipt this Period 21.00 Payroll Deduction Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 99 / 173 (check only one) | | | | |
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| An | y information copied from such Reports and Sta | itements may | not be sold or used by any perso | 13 14 15 16 17 on for the purpose of soliciting contributions | | | | |
| or | for commercial purposes, other than using the n | ame and add | dress of any political committee to | o solicit contributions from such committee. | | | | |
| \rangle | NAME OF COMMITTEE (In Full) National Association of Insurance and F tee | inancial A | dvisors Political Action Com | mit- | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | | | |
| ۹. | Mr. Dennis L. Miller, LUTCF, CLU | | | Date of Receipt | | | | |
| | Mailing Address 649 State Road P.O. Box 186 | | | 09 10 2007 | | | | |
| | City | State | Zip Code | Transaction ID: R484080 | | | | |
| | Vassar | MI | 48768-0186 | Amount of Each Receipt this Period | | | | |
| | FEC ID number of contributing federal political committee. | С | | 42.50 | | | | |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction | | | | |
| | Receipt For: | | e Year-to-Date ▼ | | | | | |
| | Primary General Other (specify) ▼ | | 382.50 |] | | | | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Robert A. Miller, M.S., M.A. | | | Date of Receipt | | | | |
| | Mailing Address 88 Lukes Wood Rd | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | | |
| | City | State | Zip Code | Transaction ID: R486186 | | | | |
| | New Canaan | СТ | 06840 | Amount of Each Receipt this Period | | | | |
| | FEC ID number of contributing federal political committee. | C | | 1000.00 | | | | |
| | Name of Employer Self-employed | Occupation Insurance | | Credit Card | | | | |
| | Receipt For: | 1 | e Year-to-Date ▼ | | | | | |
| | Primary General Other (specify) ▼ | | 1000.00 | | | | | |
| <u> </u> | Full Name (Last, First, Middle Initial) Ms. Dianne C. Mitchell | | | Date of Receipt | | | | |
| | Mailing Address 2209 Ontario Street | | | 0 9 1 0 2 0 0 7 | | | | |
| | City | State | Zip Code | Transaction ID: R482315 | | | | |
| | Bellingham | WA | 98226 | Amount of Each Receipt this Period | | | | |
| | FEC ID number of contributing federal political committee. | C | | 25.00 | | | | |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction | | | | |
| | Receipt For: | Insurance | e Agent e Year-to-Date ▼ | | | | | |
| | Primary General Other (specify) ▼ | riggrogate | 225.00 | | | | | |
| | SUBTOTAL of Receipts This Page (optional) | | | | | | | |
| S | UBTOTAL of Receipts This Page (optional) | | | 1067.50 | | | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 100 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| An or f | y information copied from such Reports and Sta for commercial purposes, other than using the r | itements may | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) National Association of Insurance and F | | | |
| Α. | Full Name (Last, First, Middle Initial) Mr. James E. Mitchell, LUTCF, CTP Mailing Address 2209 Ontario City Bellingham FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General | State WA C Occupation Insurance Aggregate | e Agent • Year-to-Date ▼ | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R483107 Amount of Each Receipt this Period 60.00 Payroll Deduction |
| | Other (specify) Full Name (Last, First, Middle Initial) | 0 0 | 615.00 | |
| 3. | Mr. Martin Montefel, CLU Mailing Address 16932 SW 5th Way City | State | Zip Code | Date of Receipt M M |
| | Weston FEC ID number of contributing federal political committee. | FL C | 33326-1564 | Amount of Each Receipt this Period 50.00 |
| | Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Occupation Insurance Aggregate | | Payroll Deduction |
| Э. | Full Name (Last, First, Middle Initial) Mr. Martin Montefel, CLU Mailing Address 16932 SW 5th Way | | | Date of Receipt |
| | City Weston FEC ID number of contributing federal political committee. Name of Employer Self-employed | State FL C Occupation Insurance | | Transaction ID: R486140 Amount of Each Receipt this Period 100.00 Credit Card |
| | Receipt For: Primary General Other (specify) ▼ | | e Agent e Year-to-Date ▼ 750.00 | |
| SI | JBTOTAL of Receipts This Page (optional) | | | 210.00 |
| T | OTAL This Period (last page this line number o | nly) | | |

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| or for commercial purp | d from such Reports and Sta loses, other than using the n | itements may ame and add | not be sold or used by any perso dress of any political committee to | n for the purpose o solicit contributions | f soliciting contributions from such committee. |
| NAME OF COMMI | | | 71 | | |
| 1 | , , | inancial A | dvisors Political Action Com | nit- | |
| Full Name (Last, Fi Mr. James W. Monte | | | | Date of Rece | int |
| | WaterWorks Road | | | | D D / Y Y Y Y Y |
| Maining Madress | Waler Works Hoad | | | 0 9 | 10 2007 |
| City | | State | Zip Code | Transaction | ID: R485516 |
| Sewickley | | PA | 15143 | Amount of Ea | ach Receipt this Period |
| FEC ID number of federal political com | | С | | | 50.00 |
| Name of Employer | | Occupation | <u> </u> | Payroll Dedu | ıction |
| Self-employed | | Insurance | | | |
| Receipt For: | | | Year-to-Date ▼ | _ | |
| Primary | General | | | | |
| Other (specify | y) ▼ | | 450.00 | | |
| Full Name (Last, Fi | ret Middle Initial) | | | | |
| Mr. Robert J. Morale | | | | Date of Rece | ipt |
| Mailing Address | 1125 Wyoming Avenue | | | 0 9 | D D / Y Y Y Y Y |
| City | 0 | | | | 10 2007 |
| City | | State NV | Zip Code | | ID: R482995 |
| Reno | | INV | 89503-3342 | Amount of Ea | ach Receipt this Period |
| FEC ID number of federal political com | | C | | | 60.00 |
| · | | | | Payroll Dedu | ıction |
| Name of Employer Self-employed | | Occupation | | l ayron Boac | |
| Receipt For: | | Insurance | e Agent • Year-to-Date ▼ | _ | |
| Primary | General | Aggregate | rear-to-Date V | . | |
| Other (specify | | | 540.00 | | |
| | | | | | |
| Full Name (Last, Fi Mr. Raymond H. Mor | | | | Date of Rece | ipt |
| | 5463 Irvin Park Cove | | | M M / | D D / Y Y Y Y |
| <u></u> | | 6: : | | 0 9 | 10 2007 |
| City | | State | Zip Code | | ID: R485269 |
| Memphis | | TN | 38119 | Amount of Ea | ach Receipt this Period |
| FEC ID number of federal political com | contributing mittee | C | | | 42.00 |
| | | | | Payroll Dedu | ıction |
| Name of Employer Self-employed | | Occupation | | 1 2,700, 2000 | |
| Receipt For: | Т | Insurance | e Agent • Year-to-Date ▼ | \dashv | |
| Primary | General | Aggregate | Tour to Date ▼ | d | |
| Other (specify | | | 378.00 | | |
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| CURTOTAL - (D | eta Thia Dana (antiana) | | | | 152.00 |
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| TOTAL This Period (| last page this line number or | nly) |) | | |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 102 / 173 |
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| Δr | w information copied from such Reports and State | mente may | not be sold or used by any pers | |
| or | y information copied from such Reports and State for commercial purposes, other than using the nar | me and add | ress of any political committee to | o solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) | | | |
| \angle | National Association of Insurance and Fir tee | nancial Ac | dvisors Political Action Com | ımıt- |
| A. | Full Name (Last, First, Middle Initial) Mr Joseph L Morton, III,JD | | | Date of Receipt |
| | Mailing Address 5487 N. Bach | | | 09 10 7 2007 |
| | City | State | Zip Code | Transaction ID: R482016 |
| | Meridian | ID | 83642 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 126.00 |
| | Self-employed 1 | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | 1176.00 | 1 |
| | Other (specify) | 0 0 | 1176.00 | |
| В. | Full Name (Last, First, Middle Initial) Mr. John P. Mosley, CLU, ChFC, | | | Date of Receipt |
| | Mailing Address 24 Pitt Street | | | 09 10 YYYY 2007 |
| | City | State | Zip Code | Transaction ID: R482739 |
| | Portland | ME | 04103-4856 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 23.04 |
| | Salf-amployed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | 39 - 3 | | 7 |
| | Other (specify) 🔻 | | 207.36 | |
| C. | Full Name (Last, First, Middle Initial) Mr. Michael G. Murphy, LUTCF | | | Date of Receipt |
| | Mailing Address 1014 S. 54th St. | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R483088 |
| | <u>Omaha</u> | NE | 68106 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 28.00 |
| | Self-employed 1 | Occupation Insurance | | Payroll Deduction |
| | | | Year-to-Date ▼ | |
| | | | | 1 |
| | | | <u> </u> | |
| | Other (specify) | 0 0 | 252.00 | <u> </u> |
| s | | 0 0 | | 177.04 |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 103 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Any information copied from such Reports and Sta or for commercial purposes, other than using the r | atements may not be sold or used by any personame and address of any political committee to | n for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) | Financial Advisors Political Action Com | |
| Full Name (Last, First, Middle Initial) A. Mr. Bryan H. Nakamoto, CFP, CRPC Mailing Address 765 Amana St., #503 City Honolulu FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) City Mailing Address 14712 Shirley Street City Omaha FEC ID number of contributing federal political committee. | State Zip Code HI 96814 C Occupation Insurance Agent Aggregate Year-to-Date ▼ State Zip Code NE 68144-2144 C | Date of Receipt M M M / 20 / 2007 Transaction ID: R486006 Amount of Each Receipt this Period 250.00 Credit Card Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Occupation Insurance Agent Aggregate Year-to-Date ▼ 450.00 | Payroll Deduction |
| Full Name (Last, First, Middle Initial) Mr. John F. Nichols, CLU, DIA Mailing Address 1331 W Norwood Avenuation City Chicago FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State Zip Code IL 60660 C Occupation Insurance Agent Aggregate Year-to-Date ▼ | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| SUBTOTAL of Receipts This Page (optional) | | 342.00 |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 104 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| An or | y information copied from such Reports and State for commercial purposes, other than using the na | ements may me and add | not be sold or used by any persodress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee | nancial A | dvisors Political Action Com | mit- |
| А. | Full Name (Last, First, Middle Initial) Ms. Shirley A. Nielsen, LUTCF, CLU Mailing Address 2817 Circle Drive City Grand Island FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) City Mailing Address 2017 Grafton Ave City Henderson FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: City Henderson FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: | State NV C C Occupation Insurance | e Agent e Year-to-Date ▼ 450.00 Zip Code 89014 | Date of Receipt M |
| | Primary General Other (specify) ▼ | | 540.00 | |
| > . | Full Name (Last, First, Middle Initial) Mr. Brian E. O'Brien, CLU,ChFC,L Mailing Address 1651 Wolf Run Dr. City Richfield FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | State WI C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R482626 Amount of Each Receipt this Period 60.00 Payroll Deduction |
| s | UBTOTAL of Receipts This Page (optional) | | ····· | 170.00 |
| T | OTAL This Period (last page this line number onl | y) |) | |

| SC | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 105 / 173 | |
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| ١. | NAME OF COMMITTEE (In Full) National Association of Insurance and F | inancial Ad | dvisors Political Action Comi | nit- | |
| | tee | | | T | ╝ |
| | Full Name (Last, First, Middle Initial) Mr. James W. Oglesby, LUTCF | | | Date of Receipt | |
| | Mailing Address P. O. Box 7156 | | | 09 10 7 2007 | |
| | City Asheville | State NC | Zip Code 28802-7156 | Transaction ID: R485279 Amount of Each Receipt this Period | |
| Ī | FEC ID number of contributing federal political committee. | C | 20002-7130 | 143.00 | |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction | |
| | Receipt For: | Insurance | e Agent e Year-to-Date ▼ | - | |
| , | Primary General Other (specify) ▼ | Aggregate | 1287.00 | | |
| | Full Name (Last, First, Middle Initial) Mr. Rex W Oliver | | | Date of Receipt | _ |
| | Mailing Address 1173 South 250 West Suite 201 | | | 09 10 / Y Y Y Y Y | |
| | City Saint George | State UT | Zip Code 84770-6739 | Transaction ID: R482025 | |
| | FEC ID number of contributing federal political committee. | C | 04/70-0735 | Amount of Each Receipt this Period 42.50 | |
| Ī | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction | |
| Ī | Receipt For: | | Year-to-Date ▼ | | |
| | Primary General Other (specify) ▼ | | 382.50 | | |
| | Full Name (Last, First, Middle Initial) Ms. Martha N. Olmstead, CLU, ChFC, | | | Date of Receipt | _ |
| - | Mailing Address 56 Divisadero St | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | |
| | City | State | Zip Code | Transaction ID: R482707 | |
| | San Francisco | CA | 94117-3211 | Amount of Each Receipt this Period | Ξ |
| | FEC ID number of contributing federal political committee. | С | | 25.00 | |
| Ī | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction | |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 225.00 | | |
| SU | IBTOTAL of Receipts This Page (optional) | | | 210.50 | |
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| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F tee | nancial A | dvisors Political Action Com | mit- |
| /_ А. | Full Name (Last, First, Middle Initial) Ms. Rae Lee Olson Mailing Address 218 N El Monte Ave City Los Altos FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Ms. Faye M. Osborn, LUTCF Mailing Address PO Box 85658 City Lincoln | State CA C Occupation Insurance Aggregate State NE | | Date of Receipt M M M / D D / 2007 Transaction ID: R485423 Amount of Each Receipt this Period 42.50 Payroll Deduction Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | Occupation Insurance Aggregate | | |
| C . | Full Name (Last, First, Middle Initial) Mr. Mitchell W. Ostrove, CLU, ChFC Mailing Address 4 New King Street City White Plains FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State NY C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| S | UBTOTAL of Receipts This Page (optional) | | | 134.50 |
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| Ar or | y information copied from such Reports and Statements for commercial purposes, other than using the name and | s may | y not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Financiatee | ial A | dvisors Political Action Com | nit- |
| A. | Full Name (Last, First, Middle Initial) Mr. Todd A. Otto Mailing Address 945 Senior Ave City State Dickinson ND FEC ID number of contributing federal political committee. Name of Employer Self-employed Insur Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) | ipation rance | Zip Code 58601-3757 n e Agent e Year-to-Date ▼ 201.60 | Date of Receipt M M |
| 3. | - | ıpatioi rance | Zip Code 98294 n e Agent e Year-to-Date ▼ | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R483055 Amount of Each Receipt this Period 42.50 Payroll Deduction |
| D. | | ipation rance | Zip Code 21921-7219 n e Agent e Year-to-Date ▼ 428.00 | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R482996 Amount of Each Receipt this Period 42.00 Payroll Deduction |
| s | UBTOTAL of Receipts This Page (optional) | | _ | 109.70 |
| T | OTAL This Period (last page this line number only) | | | |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 108 / 173 |
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| An | ly information copied from such Reports and Star for commercial purposes, other than using the na | tements may | y not be sold or used by any perso | n for the purpose of soliciting contributions |
| | NAME OF COMMITTEE (In Full) | arrie ariu auc | diess of any political committee to | Solicit Contributions from Such Committee. |
| \rangle | National Association of Insurance and F tee | inancial A | dvisors Political Action Com | nit- |
| ۹. | Full Name (Last, First, Middle Initial) Mr. Roger L. Owens, LUTCF, RHU | | | Date of Receipt |
| | Mailing Address 51 Lance Ct | | | 09 / 24 / 2007 |
| | City | State | Zip Code | Transaction ID: R486179 |
| | Elkton | MD | 21921-7219 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 50.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Credit Card |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 428.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Aldous Kawailani Paalani | | | Date of Receipt |
| | Mailing Address 2219 Kaululaau Street | | | 09 / 10 / Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R484784 |
| | Honolulu | HI | 96813-1230 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 50.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | - |
| | Primary General | | | |
| | Other (specify) ▼ | | 450.00 | |
| Э. | Full Name (Last, First, Middle Initial) Mr. John Palladino, Jr. | | | Date of Receipt |
| | Mailing Address 15060 Becky Lane | | | 09 10 7 2007 |
| | City | State | Zip Code | Transaction ID: R483202 |
| | Monte Sereno | CA | 95030-2106 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 42.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | 1 |
| | Primary General Other (specify) ▼ | | 336.00 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 142.00 |
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| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 109 / 173 |
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| | EMIZED RECEIPTS | | or each category of the | (check only one) |
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| ۸n | w information copied from cuch Poports and Stat | omonte may | y not be cold or used by any perso | |
| or | ly information copied from such Reports and Stat for commercial purposes, other than using the na | ame and add | dress of any political committee to | solicit contributions from such committee. |
| $\overline{}$ | NAME OF COMMITTEE (In Full) | | | |
| \rangle | National Association of Insurance and F tee | inancial A | dvisors Political Action Com | nit- |
| ۹. | Full Name (Last, First, Middle Initial) Mr. Joseph S. Pantozzi, CLU, ChFC | | | Date of Receipt |
| | Mailing Address PO Box 95063 | | | 09 10 7 2007 |
| | City | State | Zip Code | Transaction ID: R485044 |
| | <u>Las Vegas</u> | NV | 89193 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 60.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | - |
| | Primary General Other (specify) ▼ | | 540.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. John C. Parker, RHU, LTCP | | | Date of Receipt |
| | Mailing Address 47 Laurel Hill Drive | | | 0 9 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R485518 |
| | Niantic | CT | 06357-1536 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.00 |
| | Name of Employer Self-employed | Occupation | 1 | Payroll Deduction |
| | | Insurance | | _ |
| | Receipt For: Primary General | Aggregate | Year-to-Date ▼ | |
| | Other (specify) | | 225.00 | |
| — Э. | Full Name (Last, First, Middle Initial) Mr. Clinton J. Parks | | | Date of Receipt |
| | Mailing Address 4848 Rivervale St Rt | | | 09 10 7 2007 |
| | City | State | Zip Code | Transaction ID: R483203 |
| | Soquel | CA | 95073-9727 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 22.50 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | | | Year-to-Date ▼ | 1 |
| | Primary General Other (specify) | | 202.50 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 107.50 |
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| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 110 / 173 |
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| An or | y information copied from such Reports and State for commercial purposes, other than using the na | ements may | not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{}$ | NAME OF COMMITTEE (In Full) | | | |
| \rangle | National Association of Insurance and Fitee | nancial A | dvisors Political Action Com | nit- |
| ۹. | Full Name (Last, First, Middle Initial) Mr. Barton C. Pasco, CLU, ChFC, | | | Date of Receipt |
| ٦. | Mailing Address 309 Running Cedar Lane |) | | M M / D D / Y Y Y Y |
| | | State | Zip Code | 09 10 2007 |
| | City Richmond | VA | 23229 | Transaction ID: R485109 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 50.00 |
| | Name of Employer | Occupation | | Payroll Deduction |
| | Self-employed | Insurance | | |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 467.50 | |
| 3. | Full Name (Last, First, Middle Initial) Ms. Debbie K. Paul, CLU, ChFC | | | Date of Receipt |
| | Mailing Address 4001 MacArthur Blvd Sui | | | 09 / 10 / Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R484948 |
| | Newport Beach | CA | 92660-2510 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 42.50 Payroll Deduction |
| | Name of Employer Self-employed | Occupation | | Payron Deduction |
| | Receipt For: | Insurance | e Agent e Year-to-Date ▼ | - |
| | Primary General | | 200.50 | |
| | Other (specify) ▼ | 0 0 | 382.50 | |
|). J. | Full Name (Last, First, Middle Initial) Mr. M. Jack Peckinpaugh | | | Date of Receipt |
| | Mailing Address 6001 N Morrison Rd | | | 0 9 / 2 4 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R486157 |
| | Munice | IN | 47304-9119 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 100.00 |
| | Name of Employer Self-employed | Occupation | | Credit Card |
| | Receipt For: | | e Year-to-Date ▼ | 1 |
| | Primary General Other (specify) ▼ | | 250.00 | |
| SI | JBTOTAL of Receipts This Page (optional) | | ······ | 192.50 |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 111 / 173 (check only one) X 11a 11b 11c 12 |
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| An | ry information copied from such Reports and Stat for commercial purposes, other than using the na | ements may | not be sold or used by any persodress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee | | | |
| Α. | Full Name (Last, First, Middle Initial) Mr. Gary H. Pendleton, CLU, ChFC Mailing Address 2601 Oberlin Rd City Raleigh FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General | State NC C Occupation Insurance Aggregate | e Agent Year-to-Date ▼ | Date of Receipt M M J D D J D J D J D J D J D J D J D J |
| 3. | Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. Shelly D. Pensky, LLC Mailing Address 2855 S. 4th Avenue #118 | 3 | 412.47 | Date of Receipt |
| | City Yuma FEC ID number of contributing | State AZ | Zip Code 85364-8150 | Transaction ID: R485204 Amount of Each Receipt this Period 30.00 |
| | Receipt For: Primary Other (specify) | Occupation | | Payroll Deduction |
| D. | Full Name (Last, First, Middle Initial) Mr. C. Wayne Perkins, LUTCF Mailing Address P. O. Box 397 City | State | Zip Code | Date of Receipt M |
| | Oxford FEC ID number of contributing federal political committee. | MS C | 38655-0397 | Amount of Each Receipt this Period 22.50 |
| | Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Occupation Insurance Aggregate | | Payroll Deduction |
| s | UBTOTAL of Receipts This Page (optional) | | | 98.33 |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 112 / 173 (check only one) X |
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| An or | y information copied from such Reports and Stat for commercial purposes, other than using the na | ements may ame and add | not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee | nancial A | dvisors Political Action Com | mit- |
| ۹. | Full Name (Last, First, Middle Initial) Mr. Mike Peters, CLU,ChFC,L Mailing Address 11702 Golden Valley Dr | | | Date of Receipt |
| | City | State | Zip Code | 0 9 2 1 2 0 0 7 Transaction ID: R486089 |
| | New Port Richey | FL | 34654-3650 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 50.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Credit Card |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 300.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Brian R. Phares, LIC, RFC | | | Date of Receipt |
| | Mailing Address 1420 Hackberry Road | Ctata | 7'n Oada | 09 / 10 / 2007 |
| | City North Platte | State NE | Zip Code 69101-6841 | Transaction ID: R485438 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 03101 0041 | 47.50 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 527.50 | |
| C. | Full Name (Last, First, Middle Initial) Mr. A. Duer Pierce, Jr. | | | Date of Receipt |
| | Mailing Address 5818 Kennett Pike | | | 09 10 / Y Y Y Y Y |
| | City Wilmington | State DE | Zip Code 19807-1116 | Transaction ID: R483064 |
| | FEC ID number of contributing federal political committee. | C | 1907-1110 | Amount of Each Receipt this Period 25.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 475.00 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 122.50 |
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| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 113 / 173 |
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| Any information copied from such Reports and S | Statements may | y not be sold or used by any perso | on for the purpose of soliciting contributions |
| or for commercial purposes, other than using the | e name and add | dress of any political committee to | solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | l Charactel A | duinava Dalizi A. d | !A |
| National Association of Insurance and tee | ı Financıai A | avisors Political Action Com | mil- |
| Full Name (Last, First, Middle Initial) | | | |
| Mr. R. Jan Pinney, CLU, ChFC, | | | Date of Receipt |
| Mailing Address 5152 Ellington Court | | | 09 10 2007 |
| City | State | Zip Code | Transaction ID: R484518 |
| Granite Bay | CA | 95746-7188 | Amount of Each Receipt this Period |
| FEC ID number of contributing | С | | 208.00 |
| federal political committee. | 0 | | |
| Name of Employer Self-employed | Occupatio | | Payroll Deduction |
| | Insuranc | | _ |
| Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | 1 |
| Other (specify) | | 1872.00 | |
| | | | |
| Full Name (Last, First, Middle Initial) | | | Date of Receipt |
| Mr. James D.C. Pirkle Mailing Address 395 Del Monte Ctr Su | ita 202 | | Date of Receipt |
| | 116 202 | | 09 10 2007 |
| City | State | Zip Code | Transaction ID: R482737 |
| Monterey | CA | 93940 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | | 25.00 |
| | | | Payroll Deduction |
| Name of Employer Self-employed | Occupatio | | Tayron Beddellon |
| Receipt For: | Insuranc | e Agent e Year-to-Date ▼ | |
| Primary General | 7.99.094.0 | | 1 |
| Other (specify) | | 225.00 | |
| E II Nove de l'El e Mille e l' | | | |
| Full Name (Last, First, Middle Initial) Mr. Robert B. Plybon, CLU, ChFC | | | Date of Receipt |
| Mailing Address 5116 Hedrick Dr | | | M M M / D D / Y Y Y Y |
| Cit. | Ctata | 7in Codo | 09 26 2007 |
| City Greensboro | State NC | Zip Code 27410-9320 | Transaction ID: R486266 Amount of Each Receipt this Period |
| FEC ID number of contributing | | 21710.3020 | |
| federal political committee. | C | | 550.00 |
| Name of Employer | Occupatio | n | Check |
| Self-employed | Insuranc | | |
| Receipt For: | | e Year-to-Date ▼ | |
| Primary General | | 550.00 | 1 |
| Other (specify) | | 000.00 | 1 |
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| SUBTOTAL of Receipts This Page (optional) . | | | 783.00 |
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| S | SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 114 / 173 |
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| | EMIZED RECEIPTS | | or each category of the | (check only one) |
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| Δr | w information conied from such Reports and State | amonte may | y not be sold or used by any perso | |
| or | ly information copied from such Reports and State for commercial purposes, other than using the na | me and add | dress of any political committee to | solicit contributions from such committee. |
| \setminus | NAME OF COMMITTEE (In Full) | | | |
| | National Association of Insurance and Fitee | nancial Ad | dvisors Political Action Com | mit- |
| A. | Full Name (Last, First, Middle Initial) Mr. William Poe, Jr., CLU | | | Date of Receipt |
| | Mailing Address 2397 Samuelson Rd | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R482968 |
| | Portage | IN | 46368-2531 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | 225.00 | 1 |
| | Other (specify) ▼ | 0 0 | 225.00 | |
| В. | Full Name (Last, First, Middle Initial) Mr. B. Keith Potts | | | Date of Receipt |
| | Mailing Address P.O. Box 821 | 0 9 1 0 2 0 0 7 | | |
| | City | State | Zip Code | Transaction ID: R482526 |
| | Wolfforth | TX | 79382 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 35.00 |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | , | Insurance | | |
| | Receipt For: Primary General | Aggregate | Year-to-Date ▼ | 1 |
| | Other (specify) ▼ | | 280.00 | |
| <u> </u> | Full Name (Last, First, Middle Initial) Mr. Charles W. Potts, CLU, RHU, | | | Date of Receipt |
| | Mailing Address 12725 St. Andrews Ter | | | M M / D D / Y Y Y Y |
| | - | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R485017 |
| | Oklahoma City | OK | 73120-8807 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 30.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| Primary General | | · · · | 270.00 | 1 |
| | Other (specify) ▼ | | 270.00 | 1 |
| | UBTOTAL of Receipts This Page (optional) | | | 90.00 |
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| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBE | :R: PAGE 115/173 |
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| or for com | mercial purposes, other than using the n | ame and add | lress of any political committee to | solicit contributions from | om such committee. |
| \ | OF COMMITTEE (In Full) | liner-let A | duineme Delizia el Alvito de O | :+ | |
| / Natior tee | nal Association of Insurance and F | irianciai Ad | visors Political Action Comi | mit- | |
| | me (Last, First, Middle Initial) | | | | |
| | dley W. Pratt, CLU, LUTCF | | | Date of Receipt | |
| Mailing | Address 2118 Peregrine Lane | | | 09 | 10 2007 |
| City | | State | Zip Code | Transaction ID: | R483191 |
| <u>Manka</u> | ato | MN | 56003 | | Receipt this Period |
| | number of contributing | С | | | 25.00 |
| tederal | political committee. | 9 | | D. 115 1 1 | |
| Name o | of Employer nployed | Occupation | | Payroll Deducti | ion |
| | | Insurance | | _ | |
| Receip | rimary General | Aggregate | Year-to-Date ▼ | | |
| | Other (specify) | | 225.00 | | |
| | | | · · · · · · · · · · · · · · · · · · · | <u> </u> | |
| | me (Last, First, Middle Initial) | | | Data of Bassint | |
| | Address 741 Romany Road | | | Date of Receipt | D / Y Y Y Y |
| | 7 Tribilially Hoad | | 2007 | | |
| City | | State | Zip Code | Transaction ID: | R485506 |
| <u>Charlo</u> | otte | NC | 28203-4849 | Amount of Each | Receipt this Period |
| | number of contributing political committee. | С | | | 27.50 |
| | • | | | Payroll Deducti | ion |
| Name o Self-en | of Employer nployed | Occupation | | ayron beddett | 1011 |
| Receip | | Insurance | e Agent Year-to-Date ▼ | - | |
| | rimary General | , iggi ogalo | | | |
| | Other (specify) | | 247.50 | | |
| - ··· | and the state of t | | | 1 | |
| | me (Last, First, Middle Initial) nry L Prien, CLU,LUTCF | | | Date of Receipt | |
| - | Address 415 38th St S Ste E | | | M M / D | D / Y Y Y Y |
| 0:1- | | Oheli | 7in Onda | | 10 2007 |
| City <u>Fargo</u> | | State ND | Zip Code 58103-1190 | Transaction ID: | R485332 Receipt this Period |
| | | | 30103-1130 | Amount of Each | · · · · · · · |
| | number of contributing political committee. | C | | | 50.40 |
| Namo | of Employer | Occupation | | Payroll Deducti | ion |
| Self-en | nployed | Insurance | | | |
| Receip | t For: | | Year-to-Date ▼ | 7 | |
| | Primary General | | 454.80 | | |
| ∐ C | Other (specify) | 0 0 | 757.00 | | |
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| | OF COMMITTEE (In Full) | | | |
| Nation tee | nal Association of Insurance and F | inancial A | dvisors Political Action Com | mit- |
| | nme (Last, First, Middle Initial) nanna Margaret-Mary Raisch | | | Date of Receipt |
| | Address 7864 Highlander Dr | | | 09 / 10 / Y Y Y Y Y |
| City | orogo | State AK | Zip Code | Transaction ID: R485388 |
| | nage number of contributing political committee. | C | 99518 | Amount of Each Receipt this Period 25.00 |
| Name (Self-er | of Employer nployed | Occupation | | Payroll Deduction |
| | t For: Primary General Other (specify) ♥ | Aggregate | e Year-to-Date ▼ 225.00 | |
| | me (Last, First, Middle Initial) ry K. Rake, LUTCF | | | Date of Receipt |
| | Address 1004 Dawne Drive | | | 09 / 10 / Y Y Y Y Y Y |
| City | msport | State PA | Zip Code 17701 | Transaction ID: R485288 Amount of Each Receipt this Period |
| FEC ID | number of contributing political committee. | C | 17701 | 25.00 |
| Name (Self-er | of Employer nployed | Occupation | | Payroll Deduction |
| | t For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 225.00 | |
| _ | ume (Last, First, Middle Initial) ward F. Randolph | | | Date of Receipt |
| | Address 1515 Mill Bay Road | | | 0 9 1 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | | State | Zip Code | Transaction ID: R482537 |
| Kodia | | AK | 99615-6233 | Amount of Each Receipt this Period |
| | number of contributing political committee. | C | | 42.00 |
| Name of Self-er | of Employer nployed | Occupation Insurance | | Payroll Deduction |
| | t For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 378.00 | |
| SUBTOT | AL of Receipts This Page (optional) | | | 92.00 |
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| IT | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 117 / 173 (check only one) X |
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| An or | y information copied from such Reports and Stat for commercial purposes, other than using the na | ements may | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F tee | inancial A | dvisors Political Action Com | mit- |
| ۹. | Full Name (Last, First, Middle Initial) Ms. Jeri L. Regan, CLU, ChFC, Mailing Address 2616 No. 100th Avenue | | | Date of Receipt |
| | City | State | Zip Code | 0 9 1 0 2 0 0 7 Transaction ID: R483882 |
| | Omaha FEC ID number of contributing federal political committee. | NE C | 68134-5510 | Amount of Each Receipt this Period 25.00 |
| | Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Occupation Insurance Aggregate | | Payroll Deduction |
| 3. | Full Name (Last, First, Middle Initial) Mr. Robert W. Rensing, LUTCF Mailing Address 2515 S. 105th Ave | | | Date of Receipt M M M |
| | City | State | Zip Code | Transaction ID: R483127 |
| | <u>Omaha</u> | NE | 68124-1825 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 42.00 Payroll Deduction |
| | Name of Employer Self-employed | Occupation Insurance | | 1 ayron beddedon |
| | Receipt For: Primary General Other (specify) | Aggregate | Year-to-Date ▼ 378.00 | |
| C. | Full Name (Last, First, Middle Initial) Mr. Stephen M. Rice | | | Date of Receipt |
| | Mailing Address 54 Alpine Ave | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R486153 |
| | Los Gatos | CA | 95030 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 2500.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Credit Card |
| | Receipt For: Primary General Other (specify) | Aggregate | Year-to-Date ▼ 2500.00 | |
| S | UBTOTAL of Receipts This Page (optional) | | | 2567.00 |
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| IT | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 118 / 173 (check only one) X |
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| Ar or | y information copied from such Reports and Stater for commercial purposes, other than using the nam | ments may ne and add | not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fin | ancial A | dvisors Political Action Com | mit- |
| A. | Full Name (Last, First, Middle Initial) Mr. August P. Richter, IV, LUTCF, Mailing Address 401 Wild Oak Drive City Manitowoc FEC ID number of contributing federal political committee. Name of Employer Self-employed | State WI C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| 3. | Mr. John F. Ridoux Mailing Address 911 Thorpe Drive City Louisville FEC ID number of contributing federal political committee. Name of Employer Self-employed | State KY C Occupation Insurance Aggregate | | Date of Receipt M M M |
| - . | Self-employed 1 | State FL C C C C C C C C C C C C C | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| s | UBTOTAL of Receipts This Page (optional) | | _ | 100.60 |
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| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 119 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Any information copied from such Reports and St or for commercial purposes, other than using the | tatements may not be sold or used by any personame and address of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | Financial Advisors Political Action Com | |
| Full Name (Last, First, Middle Initial) Mr. Adi Ringer, LUTCF, CFP Mailing Address 888 Vista Brisa City San Luis Obispo FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General | State Zip Code CA 93405 C Occupation Insurance Agent Aggregate Year-to-Date ▼ | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Other (specify) ▼ Full Name (Last, First, Middle Initial) | 202.50 | |
| Mr. Richard R. Rios, CLU, ChFC Mailing Address 8720 El Chapul Way City | State Zip Code | Date of Receipt 0 9 1 0 2 0 0 7 Transaction ID: R482500 |
| Fair Oaks FEC ID number of contributing federal political committee. | CA 95628-5454 | Amount of Each Receipt this Period 50.00 |
| Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Occupation Insurance Agent Aggregate Year-to-Date ▼ 450.00 | Payroll Deduction |
| Full Name (Last, First, Middle Initial) Mr. Robert M. Roach, CLU, ChFC Mailing Address 1287 Harrison Pond Dr | rive | Date of Receipt |
| City New Albany FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State Zip Code OH 43054 C Occupation Insurance Agent Aggregate Year-to-Date ▼ 1318.30 | Transaction ID: R484744 Amount of Each Receipt this Period 125.00 Payroll Deduction |
| SUBTOTAL of Receipts This Page (optional) | | 197.50 |
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| | DULE A (FEC Form 3X) ZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 120 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Any informor for con | mation copied from such Reports and Stat nmercial purposes, other than using the na | ements may ame and add | not be sold or used by any persodress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| \ | OF COMMITTEE (In Full) Onal Association of Insurance and F | inancial A | dvisors Political Action Com | mit- |
| A. Mr. Ra Mailin City Lubb FEC I federa Name Self-e Recei City Shre FEC I federa Recei Recei | ame (Last, First, Middle Initial) andy T. Robertson, LUTCF g Address P.O. Box 93893 OCK D number of contributing all political committee. of Employer employed pt For: Primary General Other (specify) ame (Last, First, Middle Initial) avid B. Romero, RFC, CRC, g Address 6909 Oak Hill Cir. Veport D number of contributing all political committee. of Employer employed pt For: Primary General Other (specify) General Other (specify) | State LA C Occupation Insurance | e Agent Year-to-Date ▼ 350.00 Zip Code 71106-3415 | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City Rose FEC I federa Name Self-e | ame (Last, First, Middle Initial) hn M. Root, LUTCF g Address 1759 NW Riverview Dr burg D number of contributing al political committee. of Employer employed pt For: Primary General Other (specify) | State OR C Occupation Insurance Aggregate | | Date of Receipt M M Z 4 Z 0 0 7 Transaction ID: R486212 Amount of Each Receipt this Period 125.00 Credit Card |
| SUBTO | TAL of Receipts This Page (optional) | |) | 425.00 |
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| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 121 / 173 | | | |
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| or | y information copied from such Reports and State for commercial purposes, other than using the na | ime and add | dress of any political committee to | solicit contributions from such committee. | | | |
| $\overline{}$ | NAME OF COMMITTEE (In Full) | | | | | | |
| \rangle | National Association of Insurance and Fitee | nancial A | dvisors Political Action Com | mit- | | | |
| Δ | Full Name (Last, First, Middle Initial) Mr. Harry S. Rosnick, LUTCF | | | Date of Receipt | | | |
| ٠. | Mailing Address 3435 Jefferson Davis Hw | | | M M / D D / Y Y Y Y | | | |
| | P.O. Box 360 | y | | 09 10 2007 | | | |
| | City | State | Zip Code | Transaction ID: R482465 | | | |
| | Fredericksburg | VA | 22404-0360 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | С | | 25.00 | | | |
| | Name of Employer | Occupation | <u> </u> | Payroll Deduction | | | |
| | Self-employed | Insurance | | | | | |
| | Receipt For: | | e Year-to-Date ▼ | 7 | | | |
| | Primary General | | 005.00 | | | | |
| | Other (specify) ▼ | | 285.00 | | | | |
| | | | | | | | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Harry S. Rosnick, LUTCF | | | Date of Receipt | | | |
| | Mailing Address 3435 Jefferson Davis Hw | у | | M M / D D / Y Y Y Y | | | |
| | P.O. Box 360 | 0 | 7' 0 1 | 09 14 2007 | | | |
| | City | State | Zip Code | Transaction ID: R485824 | | | |
| | Fredericksburg | VA | 22404-0360 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | C | | 10.00 | | | |
| | Name of Employer | Occupation | 2 | Cash | | | |
| | Name of Employer Self-employed | Insurance | | | | | |
| | Receipt For: | | e Year-to-Date ▼ | _ | | | |
| | Primary General | | | 1 | | | |
| | Other (specify) ▼ | | 285.00 | | | | |
| | | | | | | | |
| Э. | Full Name (Last, First, Middle Initial) Mr. Franklin W. Roth, LUTCF | | | Date of Receipt | | | |
| | Mailing Address 608 Buckwood Dr. | | | M M / D D / Y Y Y Y | | | |
| | | | | 09 24 2007 | | | |
| | City | State | Zip Code | Transaction ID: R486205 | | | |
| | Orlando | FL | 32806-7023 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | C | | 250.00 | | | |
| | | | | Credit Card | | | |
| | Name of Employer Self-employed | Occupation | | Oreuit Gard | | | |
| | | Insurance | | \dashv | | | |
| | Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | | | | |
| | Other (specify) | | 750.00 | | | | |
| | | - | | ' | | | |
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| S | UBTOTAL of Receipts This Page (optional) | | ····· | 285.00 | | | |
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| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 122 / 173 | |
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| Ar | y information copied from such Reports and Statem | nents may | not be sold or used by any perso | on for the purpose of soliciting contributions |
| or | for commercial purposes, other than using the nam | e and add | ress of any political committee to | solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) | | | |
| | National Association of Insurance and Finatee | ancial Ac | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Ms. Shelley M. Rowe, LUTCF | | | Date of Receipt |
| Λ. | Mailing Address 5908 E. Conservation Dr. | | | M M / D D / Y Y Y Y |
| | | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R482933 |
| | Longmont CO | | 80504 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | | | 37.50 |
| | Name of Employer C | Occupation | <u> </u> | Payroll Deduction |
| | Self-employed Ir | nsurance | e Agent | |
| | | Aggregate | Year-to-Date ▼ | |
| | Primary General | 1 1 | 337.50 | 1 |
| | Other (specify) ▼ | 0 0 | 007.00 | |
| — В. | Full Name (Last, First, Middle Initial) Ms. Sherri A. Rush, LUTCF | | | Date of Receipt |
| | Mailing Address 2140 Jefferson St Suite C | | | M M / D D / Y Y Y Y |
| | | | | 09 10 2007 |
| | City State | | Zip Code | Transaction ID: R483167 |
| | <u>Napa</u> | CA | 94559 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 25.00 |
| | | | | Payroll Deduction |
| | Salf-amployed | occupation | | Tayron Boadonon |
| | | nsurance | Year-to-Date ▼ | _ |
| | Primary General | nggregate | Teal-10-Date V | 1 |
| | Other (specify) ▼ | | 225.00 | |
| | | | | |
| C. | Full Name (Last, First, Middle Initial) Mr. D. David Russell | | | Date of Receipt |
| | Mailing Address 8461 Eagle Preserve Way | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R482616 |
| | - | FL | 34241-9449 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | | | 50.00 |
| | federal political committee. | C | | |
| | Name of Employer | Occupation | 1 | Payroll Deduction |
| | | nsurance | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | |
| | | | | |
| | Primary General | | 450.00 | |
| | | 0 0 | 450.00 | |
| | Primary General Other (specify) ▼ | 0 0 | | 112 50 |
| s | Primary General | | | 112.50 |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 123 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar or | ny information copied from such Reports and Statemer for commercial purposes, other than using the name a | ents may and add | not be sold or used by any persoress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Finance | ncial Ac | dvisors Political Action Com | nit- |
| Α. | Bozeman FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | cupation | Zip Code 59715-6129 Agent Year-to-Date ▼ | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| 3. | Newton M. FEC ID number of contributing federal political committee. Name of Employer Self-employed Occ Inst | cupation | Zip Code 02458 2 Agent Year-to-Date ▼ | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R481421 Amount of Each Receipt this Period 250.00 Credit Card |
| D. | Kenosha W FEC ID number of contributing federal political committee. Name of Employer Self-employed Occ Inst | cupation | Zip Code 53144 e Agent Year-to-Date ▼ | Date of Receipt M M M / D D V 2007 Transaction ID: R482780 Amount of Each Receipt this Period 27.00 Payroll Deduction |
| s | UBTOTAL of Receipts This Page (optional) | | > | 337.00 |
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| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 124 / 173 |
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| Ar | ny information copied from such Reports and State | ements may | γ not be sold or used by any perso | n for the purpose of soliciting contributions |
| or | for commercial purposes, other than using the na | me and add | dress of any political committee to | solicit contributions from such committee. |
| \setminus | NAME OF COMMITTEE (In Full) | | duinema Delitii Autus O | :• |
| / | National Association of Insurance and Fi tee | nanciai A | dvisors Political Action Comi | TIIL- |
| | Full Name (Last, First, Middle Initial) | | | |
| ۹. | Mr. Walter M. Schieffer, Jr., LUTCF | | | Date of Receipt |
| | Mailing Address 17501 John Wayne | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R483023 |
| | Perry | OK | 73077-9513 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | С | | 25.20 |
| | federal political committee. | | | |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction |
| | | Insurance | • | |
| | Receipt For: Primary General | Aggregate | Year-to-Date ▼ | |
| | Other (specify) \blacktriangledown | ' ' | 226.80 | |
| | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | B . (B .) |
| ೆ . | Mrs. Peggy D. Schneider, LUTCF Mailing Address 2862 Avenue D | | | Date of Receipt |
| | Mailing Address 3862 Avenue D | | | 09 24 2007 |
| | City | State | Zip Code | Transaction ID: R486199 |
| | Billings | MT | 59102 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | C | | 240.00 |
| | federal political committee. | | | |
| | Name of Employer Self-employed | Occupation | | Credit Card |
| | | Insurance | | |
| | Receipt For: Primary General | Aggregate | Year-to-Date ▼ | |
| | Other (specify) | | 240.00 | |
| | | | | |
| ` | Full Name (Last, First, Middle Initial) | | | Data of Descript |
| ٠. | Mr. Joseph E. Schnetzka Mailing Address 5250 N. Salem Cixrcct Re | 4 | | Date of Receipt |
| | Mailing Address 5250 N. Salem Cixrcct Ro | u | | 09 20 2007 |
| | City | State | Zip Code | Transaction ID: R485979 |
| | Dover | PA | 17315 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | С | | 250.00 |
| | federal political committee. | | | |
| | Name of Employer Self-employed | Occupation | | Credit Card |
| | | Insurance | | 4 |
| | Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | |
| | Other (specify) | | 250.00 | |
| | | | | |
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| SCHEDULE A (FEC Form 3X |) | Use separate schedule(s) | FOR LINE NUMBER: PAGE 125 / 173 (check only one) |
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| Any information copied from such Reports and or for commercial purposes, other than using t | Statements may he name and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions a solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) National Association of Insurance artee | nd Financial A | dvisors Political Action Com | mit- |
| Full Name (Last, First, Middle Initial) Mr. Daniel J. Scholz, CLU, ChFC Mailing Address 1510 So. 183 Circle | | | Date of Receipt |
| City | State | Zip Code | 0 9 1 0 2 0 0 7 Transaction ID: R485290 |
| <u>Omaha</u> | NE | 68130 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 105.00 |
| Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 975.00 | |
| Full Name (Last, First, Middle Initial) Mr. Daniel J. Scholz, CLU, ChFC | | | Date of Receipt |
| Mailing Address 1510 So. 183 Circle City | State | Zip Code | 0 9 2 4 2 0 0 7 |
| Omaha | NE NE | 68130 | Transaction ID: R486230 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 00100 | 200.00 |
| Name of Employer Self-employed | Occupation Insurance | | Credit Card |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 975.00 | |
| Full Name (Last, First, Middle Initial) Mr. Allan B. Schon | ' | | Date of Receipt |
| Mailing Address 441 16th NW | | | 09 / 10 / Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R483233 |
| Minot | ND | 58703-1941 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 30.00 Payroll Deduction |
| Name of Employer Self-employed | Occupation | e Agent | - ayron beduction |
| Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 270.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 335.00 |
| TOTAL This Period (last page this line numb | er only) | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 126 / 173 (check only one) X |
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| An or | ly information copied from such Reports and State for commercial purposes, other than using the na | ements may me and add | not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fittee | nancial A | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Mr. Mark B. Schwendeman Mailing Address 427 4th St City Marietta FEC ID number of contributing federal political committee. | State OH C | Zip Code 45750-2004 | Date of Receipt M M M / D D / Y Y Y Y Y O 9 1 0 2 0 0 7 Transaction ID: R485495 Amount of Each Receipt this Period 30.00 Payroll Deduction |
| | Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Insurance | | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Walter J. Scott, CLU Mailing Address 1022 WASHINGTON AVI | Ē. | | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R484687 |
| | OSHKOSH FEC ID number of contributing federal political committee. | C | 54901-5354 | Amount of Each Receipt this Period 50.40 |
| | Self-employed 1 | Occupation Insurance | e Agent | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 453.60 | |
| — Э. | Full Name (Last, First, Middle Initial) Mr. Harry E. Sechman | | | Date of Receipt |
| | Mailing Address 13 Beechwood Dr | | | 09 10 7 2007 |
| | City Rutland | State MA | Zip Code 01543-1751 | Transaction ID: R483035 |
| | FEC ID number of contributing federal political committee. | C | 01343-1701 | Amount of Each Receipt this Period 30.00 |
| | Self-employed | Occupation Insurance | e Agent | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 270.00 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 110.40 |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 127 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar or | y information copied from such Reports and State for commercial purposes, other than using the na | ements may ime and add | not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee | nancial A | dvisors Political Action Com | mit- |
| A. | Full Name (Last, First, Middle Initial) Mr. William T. Self, MDRT,LUTCF Mailing Address P.O. Box 3033 City Muscle Shoals FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Dale J. Seymour | State AL C C Occupation Insurance Aggregate | | Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| 3. | Mr. Dale J. Seymour Mailing Address 2401 Wealdstone Rd. City Toledo FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State OH C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R485032 Amount of Each Receipt this Period 10.00 Payroll Deduction |
| D. | Full Name (Last, First, Middle Initial) Mr. James A. Shalek, CLU,ChFC Mailing Address 1706 Candleberry Lane City Yorkville FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State IL C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| s | UBTOTAL of Receipts This Page (optional) | |) | 302.50 |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 128 / 173 (check only one) X 11a 11b 11c 12 |
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| An or | y information copied from such Reports and State for commercial purposes, other than using the na | ements may me and add | not be sold or used by any persodress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee | nancial A | dvisors Political Action Com | mit- |
| A. 3. | Full Name (Last, First, Middle Initial) Mr. James A. Shalek, CLU,ChFC Mailing Address 1706 Candleberry Lane City Yorkville FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Mr. Kenneth A. Sherlin, III,LUTCF Mailing Address 8 First Street | State IL C Occupation Insurance Aggregate | | Date of Receipt M |
| | City Ashville FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Other (specify) | State NC C Occupation Insurance Aggregate | | Transaction ID: R482957 Amount of Each Receipt this Period 13.75 Payroll Deduction |
| C . | Full Name (Last, First, Middle Initial) Mr. Troy J. Shreve, CLU Mailing Address 7100 S 45th Street City Lincoln FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State NE C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R484879 Amount of Each Receipt this Period 42.00 Payroll Deduction |
| S | UBTOTAL of Receipts This Page (optional) | |) | 105.75 |
| T | OTAL This Period (last page this line number onl | y) |) | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 129 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| An | y information copied from such Reports and Stator commercial purposes, other than using the na | tements may ame and add | not be sold or used by any persodress of any political committee to | n for the purpose of soliciting contributions |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F tee | inancial A | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Mr. James John Silbernagel, LUTCF,CFP Mailing Address W 2329 Capital Drive City Campbellsport FEC ID number of contributing federal political committee. Name of Employer Self-employed | State WI C Occupation Insurance | e Agent | Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 540.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Ken Simons, CLU, ChFC, Mailing Address 808 Thoroughbred Lane City Artesia FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State NM C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| C. | Full Name (Last, First, Middle Initial) Mr. Gary R. Sitzmann, CLU Mailing Address 29 Sierra Ave City Piedmont FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State CA C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R485644 Amount of Each Receipt this Period 500.00 Check |
| SI | JBTOTAL of Receipts This Page (optional) | | _ | 610.10 |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 130 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar or | y information copied from such Reports and Sta for commercial purposes, other than using the r | atements may name and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and I tee | Financial A | dvisors Political Action Com | mit- |
| A. | Full Name (Last, First, Middle Initial) Mr. Lee Slavutin, CLU, CPC Mailing Address 321 W. 78th Street City Nwe York FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State NY C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / 2007 Transaction ID: R485751 Amount of Each Receipt this Period 500.00 Check |
| 3. | Mr. Alexander S. Smith, LUTCF Mailing Address 3331 Pennington Ln City Winston-Salem FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State NC C Occupation Insurance Aggregate | | Date of Receipt M M M |
| D. | Full Name (Last, First, Middle Initial) Ms. Debra N. Smith Mailing Address 1345 Cedar Park PI City Stone Mountain FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State GA C Occupation Insurance Aggregate | | Date of Receipt M M J D D J Z D D Z D D Z D D Z D D Z D D D Z D D D Z D D D Z D D D Z D D D Z D D D D Z D |
| s | UBTOTAL of Receipts This Page (optional) | | _ | 745.00 |
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| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 131 / 173 | |
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| | EMIZED RECEIPTS | | or each category of the Detailed Summary Page | (check only one) X 11a |
| Ar | ny information copied from such Reports and Sta for commercial purposes, other than using the r | atements may | not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions |
| | NAME OF COMMITTEE (In Full) National Association of Insurance and F | | | |
| Α. | Full Name (Last, First, Middle Initial) Mr. H. Dan Smith, CLU, LUTCF Mailing Address 1616 Rio Vista City Dallas FEC ID number of contributing federal political committee. | State TX | Zip Code 75208-2338 | Date of Receipt M M |
| | Name of Employer Self-employed Receipt For: Primary General Other (specify) | Occupation Insurance Aggregate | | Payroll Deduction |
| В. | Full Name (Last, First, Middle Initial) Mr. H. Dan Smith, CLU, LUTCF Mailing Address 1616 Rio Vista | | | Date of Receipt M |
| | City | State | Zip Code | Transaction ID: R485854 |
| | Dallas FEC ID number of contributing federal political committee. Name of Employer Self-employed | TX C | 75208-2338 | Amount of Each Receipt this Period 250.00 Check |
| | Receipt For: Primary General Other (specify) | Insurance Aggregate | e Agent e Year-to-Date ▼ 2550.00 | |
| C. | Full Name (Last, First, Middle Initial) Mr. H. Dan Smith, CLU, LUTCF Mailing Address 1616 Rio Vista | | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City <u>Dallas</u> | State TX | Zip Code 75208-2338 | Transaction ID: R486192 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | 1 1 1 1 1 1 | 250.00 |
| | Name of Employer Self-employed Receipt For: Primary General Other (specify) | Occupation Insurance Aggregate | | Credit Card |
| s | UBTOTAL of Receipts This Page (optional) | | | 715.00 |
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| IT | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 132 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| An or | y information copied from such Reports and State for commercial purposes, other than using the na | ements may ime and add | not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee | nancial Ad | dvisors Political Action Com | mit- |
| A. 3. | Full Name (Last, First, Middle Initial) Mr. Robert O. Smith, CLU, ChFC, Mailing Address 5824 Arbol Ct. City Rockford FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Mr. Russell A. Smith Mailing Address 22928 San Joaquin Drive City Canyon Lake FEC ID number of contributing federal political committee. | East State CA | e Agent Year-to-Date ▼ 600.00 Zip Code 92587-7831 | Date of Receipt M M 24 2007 Transaction ID: R486220 Amount of Each Receipt this Period 100.00 Credit Card |
| | Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Occupation Insurance Aggregate | | - Fayron Deduction |
| Э. | Full Name (Last, First, Middle Initial) Mr. David E. Smithkey, CLU, RFC Mailing Address 9451 Heddy Drive City Flushing | State MI | Zip Code 48433 | Date of Receipt M M M / D D / Y Y Y Y Y O 9 1 0 2 0 0 7 Transaction ID: R484603 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Occupation Insurance Aggregate | | Payroll Deduction |
| S | UBTOTAL of Receipts This Page (optional) | | | 516.00 |
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| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 133 / 173 | |
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| or | for commercial purposes, other than using the nan | ne and add | dress of any political committee to | solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) | | Literation Deliving Assistance | . • |
| | National Association of Insurance and Fin tee | anciai A | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Mr. Mark V. Snider, ChFC | | | Date of Receipt |
| Α. | Mailing Address 44 Elmwood Place | | | M M / D D / Y Y Y Y |
| | | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R485141 |
| | Athens | OH | 45701-1904 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 42.00 |
| | Name of Employer Self-employed | Occupation | n | Payroll Deduction |
| | | nsurance | | |
| | Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | 1 |
| | Other (specify) | | 378.00 | |
| _ | | | | |
| В. | | | | Date of Receipt |
| | Mailing Address 27 Lancia Drive | | | 09 04 Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R481406 |
| | East Norwich | NY | 11732-1113 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 250.00 |
| | | | | Check |
| | Self-employed 1 | Occupation Insurance | | |
| | | | e Year-to-Date ▼ | - |
| | Primary General | 1 1 | | 1 |
| | Other (specify) ▼ | | 250.00 | |
| _ | Full Name (Last, First, Middle Initial) Mr. Adam A. Solano, Jr. | | | Date of Descipt |
| C. | Mailing Address 12 Lighthouse Ln. | | | Date of Receipt |
| | | | | 09 24 2007 |
| | City | State | Zip Code | Transaction ID: R486181 |
| | Third Lake | <u>IL</u> | 60030-2638 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 100.00 |
| | Name of Employer Self-employed | Occupation | n | Credit Card |
| | | nsurance | | |
| | Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | |
| | Other (specify) | | 275.00 | |
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| | | | | 392.00 |
| S | UBTOTAL of Receipts This Page (optional) | | ······ | 392.00 |
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| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 134 / 173 |
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| or | ly information copied from such Reports and Stat for commercial purposes, other than using the na | ame and add | dress of any political committee to | solicit contributions from such committee. |
| $\overline{}$ | NAME OF COMMITTEE (In Full) | | | |
| \rangle | National Association of Insurance and Fitee | nancial A | dvisors Political Action Com | nit- |
| ۹. | Full Name (Last, First, Middle Initial) Mr. Philip L. Solinsky, LUTCF | | | Date of Receipt |
| | Mailing Address 11240 E. Calle Vaqueros | 3 | | 09 21 2007 |
| | City | State | Zip Code | Transaction ID: R486063 |
| | Tucson | AZ | 85749-9520 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 60.00 |
| | Name of Employer Self-employed | Occupation | | Credit Card |
| | | Insurance | | - |
| | Receipt For: Primary General Other (specify) | Aggregate | e Year-to-Date ▼ 270.00 | |
| | Full Name (Last, First, Middle Initial) Mr. Philip L. Solinsky, LUTCF | | | Date of Receipt |
| J . | Mailing Address 11240 E. Calle Vaqueros | ; | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R486164 |
| | Tucson | AZ | 85749-9520 | Amount of Each Receipt this Period |
| | FEC ID number of contributing | | | |
| | federal political committee. | C | | 90.00 |
| | Name of Employer | Occupation | n | Credit Card |
| | Name of Employer Self-employed | Insurance | | |
| | Receipt For: | | e Year-to-Date ▼ | |
| | Primary General | | | |
| | Other (specify) | 0 0 | 270.00 | |
| С. | Full Name (Last, First, Middle Initial) Mr. Joseph W. Spada | | | Date of Receipt |
| | Mailing Address 4 Campus Drive | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R485647 |
| | Parsippany | NJ | 07054-4405 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 300.00 |
| | Name of Employer Self-employed | Occupation | | Check |
| | | Insurance | | - |
| | Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | |
| | Other (specify) | 0 0 | 300.00 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 450.00 |
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| SCHEDULE A (FEC Form 3X) |) | Use separate schedule(s) | FOR LINE NUMBER: PAGE 135 / 173 |
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| TEMIZED RECEIPTS | | or each category of the | (check only one) X 11a 11b 11c 12 |
| | | Detailed Summary Page | 13 14 15 16 17 |
| Any information copied from such Reports and or for commercial purposes, other than using the | Statements may | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | | | |
| National Association of Insurance an tee | d Financial A | dvisors Political Action Com | mit- |
| Full Name (Last, First, Middle Initial) A. Ms. Sharon L. Sparling, CIC | | | Date of Receipt |
| Mailing Address P.O. Box 1914 | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R483272 |
| Mount Vernon | WA | 98273-1914 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 45.00 |
| Name of Employer | Occupation | n | Payroll Deduction |
| Self-employed | Insurance | | |
| Receipt For: | | e Year-to-Date ▼ | 7 |
| Primary General Other (specify) ▼ | 0 0 | 405.00 | |
| Full Name (Last, First, Middle Initial) 3. Mr. Preston R. Speece, LUTCF | | | Date of Receipt |
| Mailing Address 14620 Fowler Ave | | | 0 9 1 0 2 0 0 7 |
| City State | | Zip Code | Transaction ID: R482588 |
| <u>Omaha</u> | NE | 68116 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 30.00 |
| Name of Employer Self-employed | Occupation | | Payroll Deduction |
| Receipt For: | Insurance | e Agent e Year-to-Date ▼ | _ |
| Primary General | Aggregate | e Teal-lo-Dale ▼ | 1 |
| Other (specify) ▼ | | 270.00 | |
| Full Name (Last, First, Middle Initial) Mr. Walter C. Sprye, Jr., CLU, C | • | | Date of Receipt |
| Mailing Address 101 Stoney Brook Ro | l. | | 0 9 1 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R485244 |
| Rocky Mount | NC | 27804 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 46.20 |
| Name of Employer Self-employed | Occupation | | Payroll Deduction |
| Receipt For: | Aggregate | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 0 0 | 415.80 | |
| SUBTOTAL of Receipts This Page (optional) | | | 121.20 |
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| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 136 / 173 | | | |
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| An or | y information copied from such Reports and Stat for commercial purposes, other than using the na | ements may | not be sold or used by any persodress of any political committee to | n for the purpose of soliciting contributions | | | |
| $\overline{}$ | NAME OF COMMITTEE (In Full) | | | | | | |
| \rangle | National Association of Insurance and F tee | inancial A | dvisors Political Action Com | nit- | | | |
| ۹. | Full Name (Last, First, Middle Initial) Mr. Mark A. Staat | | | Date of Receipt | | | |
| | Mailing Address 14315 Pine Creek Court, | #202 | | 09 10 7 2007 | | | |
| | City | State | Zip Code | Transaction ID: R484736 | | | |
| | Holland | MI | 49424-1265 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | C | | 22.50 | | | |
| | Name of Employer | Occupation | 1 | Payroll Deduction | | | |
| | Self-employed Se | Insurance | e Agent | | | | |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | | | | |
| | Primary General Other (specify) ▼ | | 202.50 | | | | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Lawrence Stack, CLU, ChFC | | | Date of Receipt | | | |
| Mailing Address 28411 Northwestern Hwy Ste 130 | | / Ste 1300 | | 09 / 10 / Y Y Y Y Y Y | | | |
| | City | State | Zip Code | Transaction ID: R484628 | | | |
| | Southfield | MI | 48034-5543 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | С | | 60.00 | | | |
| | Name of Employer Self-employed | Occupation | | Payroll Deduction | | | |
| | | Insurance | e Agent e Year-to-Date ▼ | - | | | |
| | Receipt For: Primary General | Aggregate | : Teal-10-Date V | | | | |
| | Other (specify) ▼ | | 460.00 | | | | |
| C. | Full Name (Last, First, Middle Initial) Mr. Angelo T. Stath | | | Date of Receipt | | | |
| | Mailing Address 7821 Massachusetts | | | 0 9 1 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | |
| | City | State | Zip Code | Transaction ID: R485491 | | | |
| | Merriville | IN | 46410-5531 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | C | | 50.00 | | | |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction | | | |
| | Receipt For: | | Year-to-Date ▼ | 1 | | | |
| | Primary General Other (specify) ▼ | 1 1 | 450.00 | | | | |
| s | SUBTOTAL of Receipts This Page (optional) | | | | | | |
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| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 13//1/3 |
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| Any information copied from such Reports and St or for commercial purposes, other than using the | atements may | y not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) | | | |
| National Association of Insurance and tee | Financial A | dvisors Political Action Com | mit- |
| Full Name (Last, First, Middle Initial) Mr. John P. Steele, LUTCF | | | Date of Receipt |
| Mailing Address 122 West Main | | | 09 / 10 / Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R482740 |
| Manhattan | MT | 59741 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 30.00 |
| Name of Employer Self-employed | Occupatio Insuranc | | Payroll Deduction |
| Receipt For: | | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 0 0 | 270.00 | |
| Full Name (Last, First, Middle Initial) 3. Mr. Jerry Lynn Stephens, LUTCF | | | Date of Receipt |
| Mailing Address 130 Tarheel Rd | | | 09 / 10 / Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R482658 |
| Lumberton | NC | 28358 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 23.10 |
| Name of Employer Self-employed | Occupatio Insuranc | | Payroll Deduction |
| Receipt For: | Aggregate | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | | 207.90 | |
| Full Name (Last, First, Middle Initial) 7. Mr. Pierce Allen Stevens, Jr. | | | Date of Receipt |
| Mailing Address P O Box 119 | | | 0 9 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R482913 |
| Anguilla | MS | 38721 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.00 |
| Name of Employer Self-employed | Occupatio Insuranc | | Payroll Deduction |
| Receipt For: | Aggregate | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 0 0 | 225.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 78.10 |
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| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 138 / 173 |
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| or for | nformation copied from such Reports and State commercial purposes, other than using the na | ame and add | rnot be sold or used by any perso dress of any political committee to | solicit contributions from such committee. |
|) N | AME OF COMMITTEE (In Full) lational Association of Insurance and F ee | inancial A | dvisors Political Action Com | nit- |
| A. <u>M</u> | ull Name (Last, First, Middle Initial) Ir. Matthew B. Stone, LUTCF | | | Date of Receipt |
| _ | lailing Address 212 Stoney Dr. | Chaha | 7'- Oada | 09 10 2007 |
| Ci D | ιτγ Purham | State NC | Zip Code 27703-2901 | Transaction ID: R482150 Amount of Each Receipt this Period |
| | EC ID number of contributing deral political committee. | С | | 24.75 |
| N: S | ame of Employer elf-employed | Occupation Insurance | | Payroll Deduction |
| R | eceipt For: Primary General Other (specify) ▼ | Aggregate | Year-to-Date ▼ 244.75 | |
| 3. м | ull Name (Last, First, Middle Initial) Ir. Nicholas John Stosic | | | Date of Receipt |
| M | ailing Address 9820 Dixon Lane | | | 09 10 7 2007 |
| _ | ity | State | Zip Code | Transaction ID: R485203 |
| | deno | NV | 89511-9455 | Amount of Each Receipt this Period |
| | EC ID number of contributing deral political committee. | C | | 126.00 Payroll Deduction |
| N S | ame of Employer elf-employed | Occupation Insurance | | Payron Deduction |
| R | eceipt For: | | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | 0 0 | 1134.00 | |
| | ull Name (Last, First, Middle Initial) | | | Date of Receipt |
| _ | lailing Address 13115 Beach Cir. | | | 0 9 1 0 2 0 0 7 |
| | ity | State | Zip Code | Transaction ID: R485064 |
| _ | nchorage | AK | 99515-3748 | Amount of Each Receipt this Period |
| fe | EC ID number of contributing deral political committee. | C | | 105.00 Payroll Deduction |
| N S | ame of Employer elf-employed | Occupation Insurance | | i ayıdı Deduction |
| R | eceipt For: Primary General Other (specify) | | Year-to-Date ▼ 1000.00 | |
| SUE | STOTAL of Receipts This Page (optional) | |) | 255.75 |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 139 / 173 (check only one) X |
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| An or | y information copied from such Reports and Sta for commercial purposes, other than using the n | atements may name and add | y not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F | Financial A | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Mr. Steven M. Stratton, LUTCF,CSA Mailing Address 17131 Parkview Dr City Morgan Hill FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General | State CA C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R482974 Amount of Each Receipt this Period 105.00 Payroll Deduction |
| | Other (specify) ▼ | 0 0 | 945.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Michael W. Struebing, LUTCF, CLU Mailing Address 16112 Parker Street | Ctata | 7:a Cada | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City Omaha | State NE | Zip Code 68118-2429 | Transaction ID: R482582 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 42.50 |
| | Name of Employer Self-employed Receipt For: Primary General | Occupation Insurance Aggregate | | Payroll Deduction |
| | Primary ☐ General Other (specify) ▼ | | 382.50 | |
|) . | Full Name (Last, First, Middle Initial) Mr. John William Stubbs, Jr. Mailing Address 100 Country Club Rd | | | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R486009 |
| | Mobile | AL | 36608-2349 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 100.00 Credit Card |
| | Name of Employer Self-employed | Occupation | e Agent | - Credit Gard |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 250.00 | |
| s | UBTOTAL of Receipts This Page (optional) | | ····· | 247.50 |
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| S | SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 140 / 173 |
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| or | ny information copied from such Reports and Stat for commercial purposes, other than using the na | ame and add | dress of any political committee to | solicit contributions from such committee. |
| \setminus | NAME OF COMMITTEE (In Full) | | | |
| | National Association of Insurance and Fitee | inancial Ad | dvisors Political Action Com | mit- |
| A. | Full Name (Last, First, Middle Initial) Mr. Robert A. Styrkowicz, CLU, LUTCF | | | Date of Receipt |
| | Mailing Address 25 Monterey Drive | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R483135 |
| | Vernon Hills | IL | 60061-2332 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 65.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | E17.00 | 1 |
| | Other (specify) ▼ | 0 0 | 517.00 | |
| В. | Full Name (Last, First, Middle Initial) Mr. Stephen G. Summerlin, CFP | | | Date of Receipt |
| υ. | Mailing Address 4014 N. W. 15th Street | | | M M / D D / Y Y Y Y |
| | The state of the s | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R485130 |
| | Gainesville | FL | 32605-1912 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 42.00 |
| | - Tederal political committee. | | | Payroll Deduction |
| | Name of Employer Self-employed | Occupation | | 1 ayron beduction |
| | Receipt For: | Insurance | e Agent e Year-to-Date ▼ | _ |
| | Primary General | Aggregate | : feai-lu-Dale ▼ | 7 |
| | Other (specify) ▼ | | 378.00 | |
| _ | | | | 1 |
| C. | Full Name (Last, First, Middle Initial) Mr. Dennis P. Sunderman, CSA | | | Date of Receipt |
| | Mailing Address 2325 Jeans Ct | | | M M / D D / Y Y Y Y |
| | 011 | 01-1- | 7'- 0-4- | 09 10 2007 |
| | City Signal Hill | State CA | Zip Code 90755-4047 | Transaction ID: R482860 |
| | FEC ID number of contributing | | 30733-4047 | Amount of Each Receipt this Period |
| | federal political committee. | C | | 105.00 |
| | Name of Employer | Occupation | า | Payroll Deduction |
| | Self-employed | Insurance | | |
| | Receipt For: | | Year-to-Date ▼ | 7 |
| | Primary General | | 735.00 | 7 |
| | Other (specify) | | 700.00 | 1 |
| | L | | | |
| s | UBTOTAL of Receipts This Page (optional) | | | 212.00 |
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| T | OTAL This Period (last page this line number on | lv) | | |

| SCHEDUI | LE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUM | BER: PAGE 141 / 173 |
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| Any information or for commerce | n copied from such Reports and Sta ial purposes, other than using the n | tements may ame and add | not be sold or used by any perso dress of any political committee to | n for the purpose of solicit contributions | f soliciting contributions from such committee. |
| \ | COMMITTEE (In Full) Association of Insurance and F | inancial A | dvisors Political Action Com | nit- | |
| _ ` | Last, First, Middle Initial) an Swanson, LUTCF | | | Date of Recei | int |
| | ress 2270 E. 24TH PL | | | | 10 2007 |
| City | | State | Zip Code | Transaction I | D : R484862 |
| Yuma | | AZ | 85365-3245 | Amount of Ea | ach Receipt this Period |
| | nber of contributing ical committee. | С | | | 25.20 |
| Name of En Self-employ | nployer ed | Occupation | | Payroll Dedu | ection |
| Receipt For Prima Other | | | Year-to-Date ▼ 226.80 | | |
| | Last, First, Middle Initial) 3. Syverson, LUTCF | | | Date of Recei | int |
| | ress 509 Loomis Drive | | | | 10 2007 |
| City | | State | Zip Code | Transaction I | D : R485215 |
| <u>Mauston</u> | | WI | 53948-1522 | Amount of Ea | ach Receipt this Period |
| | nber of contributing ical committee. | С | | | 30.00 |
| Name of En Self-employ | nployer red | Occupation | | Payroll Dedu | ction |
| Receipt For | | | Year-to-Date ▼ | | |
| Prima Other | ry General (specify) ▼ | | 240.00 | | |
| | Last, First, Middle Initial) 3. Syverson, LUTCF | | | Date of Recei | ipt |
| Mailing Add | ress 509 Loomis Drive | | | | 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | | State | Zip Code | Transaction I | D : R485922 |
| <u>Mauston</u> | | WI | 53948-1522 | Amount of Ea | ach Receipt this Period |
| | nber of contributing ical committee. | C | | | -30.00 |
| Name of En Self-employ | nployer ed | Occupation Insurance | | RT | |
| Receipt For Prima Other | | Aggregate | Year-to-Date ▼ 240.00 | | |
| SUBTOTAL of | of Receipts This Page (optional) | | | | 25.20 |
| TOTAL This | Period (last page this line number or | าly) | > | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 142 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar or | ny information copied from such Reports and Statements for commercial purposes, other than using the name and | may not be sold or used by any person d address of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Financiatee | al Advisors Political Action Comr | nit- |
| Α. | Full Name (Last, First, Middle Initial) Mr. Joseph A. Sztapka Mailing Address 3705 S. Judy Ave City State Sioux Falls SD FEC ID number of contributing federal political committee. Name of Employer Self-employed Occup | 57103-7248 | Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| 3. | | 82414-2936 | Date of Receipt M M M / D D / Y Y Y Y Y 2 4 / 2 0 0 7 Transaction ID: R486138 Amount of Each Receipt this Period 400.00 Credit Card |
| - | · · · · · · · · · · · · · · · · · · · | 82414-2433 | Date of Receipt M M J J D D J Z D D J Z D D J Z D D D J Z D D D D |
| s | UBTOTAL of Receipts This Page (optional) | ····· | 525.00 |
| Т | OTAL This Period (last page this line number only) | . | |

| S | CHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 143 / 173 (check only one) |
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| IT | EMIZED RECEIPTS | | or each category of the Detailed Summary Page | X 11a 11b 11c 12 13 14 15 16 17 |
| An or | y information copied from such Reports and Statemen for commercial purposes, other than using the name a | nts may and addi | not be sold or used by any personess of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Finance | cial Ad | visors Political Action Com | nit- |
| ۹. | Full Name (Last, First, Middle Initial) Mr. Jeffrey J. Taggart Mailing Address 1107 Cedar Ln. | | | Date of Receipt |
| | P.O. Box 2433 | toto | Zin Codo | 09 24 2007 |
| | City Sta Cody W | tate /Y | Zip Code 82414-2433 | Transaction ID: R486158 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | | | 250.00 |
| | Salf-amployed 1 | cupation urance | | Credit Card |
| | Receipt For: Primary General Other (specify) ▼ | gregate | Year-to-Date ▼ 750.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Matthew S. Tassey | | | Date of Receipt |
| | Mailing Address 5 Reggio Ave. | 09 / 10 / 4 4 4 4 | | |
| | • | tate | Zip Code | Transaction ID: R485540 |
| | Old Orchard Beach FEC ID number of contributing federal political committee. C | | 04064-2709 | Amount of Each Receipt this Period 72.00 |
| | Self-employed | cupation urance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) | gregate | Year-to-Date ▼ 648.00 | |
|). | Full Name (Last, First, Middle Initial) Mr. B. Jason Taylor | | | Date of Receipt |
| | Mailing Address 9841 Meadow Ln | | | 09 / 20 / Y Y Y Y Y Y |
| | City Sta Denham Springs LA | tate Δ | Zip Code 70706 | Transaction ID: R485980 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | | 70700 | 500.00 |
| | Self-employed | cupation urance | | Credit Card |
| | Receipt For: Primary General Other (specify) | gregate | Year-to-Date ▼ 500.00 | |
| S | UBTOTAL of Receipts This Page (optional) | | | 822.00 |
| т, | OTAL This Period (last page this line number only) | | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 144 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar or | ly information copied from such Reports and Sta for commercial purposes, other than using the n | itements may ame and add | y not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F | inancial A | dvisors Political Action Com | mit- |
| A. | Full Name (Last, First, Middle Initial) Mr. Benson B. Terrell, Jr.,CFP Mailing Address 9261 Lanier Rd City Lake Charles FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General | State LA C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| 3. | Full Name (Last, First, Middle Initial) Mr. Terry R. Thayer Mailing Address 353 Prospector Trail | 0 0 | 454.00 | Date of Receipt |
| | City Bozeman FEC ID number of contributing federal political committee. | State MT | Zip Code 59718-7974 | Transaction ID: R482460 Amount of Each Receipt this Period 25.20 |
| | Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Occupation Insurance Aggregate | | Payroll Deduction |
| - . | Full Name (Last, First, Middle Initial) Mr. Terry R. Thayer Mailing Address 353 Prospector Trail City Bozeman FEC ID number of contributing federal political committee. Name of Employer | State MT C | Zip Code 59718-7974 | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | Self-employed Receipt For: Primary General Other (specify) ▼ | Insurance | | |
| s | UBTOTAL of Receipts This Page (optional) | | | 50.00 |
| T | OTAL This Period (last page this line number or | nlv) | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 145 / 173 (check only one) X |
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| An or f | rinformation copied from such Reports and State or commercial purposes, other than using the na | ements may me and add | not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| \rangle | NAME OF COMMITTEE (In Full) National Association of Insurance and Filtee | nancial A | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Mr. Earl A. Thompson, RFC, LUTCF Mailing Address 21014 Pricewood Manor City Cypress FEC ID number of contributing federal political committee. | State TX C Occupation Insurance | | Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| 3. | Mr. Robert D. Thunselle, FIC, CLU Mailing Address 4020 Gannett #3 City Casper FEC ID number of contributing federal political committee. Name of Employer | State WY C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R485058 Amount of Each Receipt this Period 27.50 Payroll Deduction |
| C. | Full Name (Last, First, Middle Initial) Mr. Brad Tison, CLU, ChFC, Mailing Address 3216 Southern Woods Dr City Des Moines FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State IA C C Occupation Insurance | | Date of Receipt M M M / D D / Y Y Y Y Y Y Transaction ID: R482503 Amount of Each Receipt this Period 50.40 Payroll Deduction |
| SI | JBTOTAL of Receipts This Page (optional) | |) | 124.90 |
| TC | OTAL This Period (last page this line number only | v) | | |

| S | CHEDULE A (FEC Form 3X) | l los senerets sebedule(s) | FOR LINE NUMBER: PAGE 146 / 173 | | | |
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| ITEMIZED RECEIPTS | | or each category of the | (check only one) | | | |
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| Ar | y information copied from such Reports and Statements r | nay not be sold or used by any perso | on for the purpose of soliciting contributions | | | |
| or | for commercial purposes, other than using the name and | address of any political committee to | solicit contributions from such committee. | | | |
| | NAME OF COMMITTEE (In Full) | | | | | |
| | National Association of Insurance and Financial tee | Advisors Political Action Com | mit- | | | |
| A. | Full Name (Last, First, Middle Initial) Mr. B. Douglas Trainer, LUTCF | | Date of Receipt | | | |
| | Mailing Address P. O. Box 270 113 Glendale Road | | 09 20 7 2007 | | | |
| | City State | Zip Code | Transaction ID: R485981 | | | |
| | Pine Forge PA | 19548-0270 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | | 275.00 | | | |
| | Name of Employer Occupa | tion | Credit Card | | | |
| | Self-employed ' | nce Agent | | | | |
| | Receipt For: Aggreg | ate Year-to-Date ▼ | | | | |
| | Primary General | 275.00 | 1 | | | |
| | Other (specify) ▼ | 273.00 | | | | |
| В. | Full Name (Last, First, Middle Initial) Mr. John D. Traynham, LUTCF | | Date of Receipt | | | |
| | Mailing Address 210 Timber Lane | | 09 10 2007 | | | |
| | City State | Zip Code | Transaction ID: R482823 | | | |
| | Anderson SC | 29621-1126 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | | 22.50 | | | |
| | Name of Employer Occupa Self-employed Incurs | tion | Payroll Deduction | | | |
| | insura | nce Agent | | | | |
| | | ate Year-to-Date ▼ | | | | |
| | Primary General | 202.50 | | | | |
| | Other (specify) ▼ | 0 0 0 0 0 0 0 0 | | | | |
| C. | Full Name (Last, First, Middle Initial) Mr. Robert W. Tull, CLU, ChFC | | Date of Receipt | | | |
| | Mailing Address 7815 Eagle Rock, N.E. | | 09 10 2007 | | | |
| | City State | Zip Code | Transaction ID: R482673 | | | |
| | Albuquerque NM | 87122 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing | | 25.50 | | | |
| | federal political committee. | | | | | |
| | Name of Employer Occupa | tion | Payroll Deduction | | | |
| | | nce Agent | | | | |
| | | ate Year-to-Date ▼ | | | | |
| | Primary General | 229.50 |] | | | |
| | Other (specify) ▼ | | | | | |
| | LIPTOTAL of Descripts This Description IV | | 323.00 | | | |
| S | UBTOTAL of Receipts This Page (optional) | ······· | | | | |
| т | TOTAL This Period (last page this line number only) | | | | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 147 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| An or f | y information copied from such Reports and Sta or commercial purposes, other than using the na | tements may ame and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F | inancial A | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Mr. Jack B. Turner, CLU, ChFC Mailing Address 310 Fairway Drive City Clarksville FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State TN C Occupation Insurance Aggregate | | Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| 3. | Full Name (Last, First, Middle Initial) Mrs. Lynda D. Turner, LUTCF Mailing Address 1070 South Bosque Loo City Bosque Farms FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State NM C Occupation Insurance | | Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: R485230 Amount of Each Receipt this Period 45.00 Payroll Deduction |
| C. | Full Name (Last, First, Middle Initial) Ms. Charmaine Uhrig, LUTCF Mailing Address RR 1 Box 273A City Minatare FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State NE C Occupation Insurance Aggregate | | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| SI | JBTOTAL of Receipts This Page (optional) | | | 587.50 |
| T | OTAL This Period (last page this line number or | nly) |) | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the | FOR LINE NUMBER: PAGE 148 / 173 (check only one) |
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| An or | y information copied from such Reports and Stat or commercial purposes, other than using the na | ements may ame and add | not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and F | inancial Ad | dvisors Political Action Com | mit- |
| _ | tee | | | 1 |
| ٩. | Full Name (Last, First, Middle Initial) Mr. Brian Urie, CFP Mailing Address 2825 F. Cottonwood Pky | | | Date of Receipt |
| | Mailing Address 2825 E. Cottonwood Pkv STE 470 | vy | | 09 10 7 2007 |
| | City | State | Zip Code | Transaction ID: R482269 |
| | Salt Lake City | UT | 84121 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 2.50 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 225.50 | |
| | Full Name (Last, First, Middle Initial) Mr. Howard Raymond Utz, LUTCF | | | Date of Receipt |
| | Mailing Address PO Box 480 | 09 / 10 / Y Y Y Y Y | | |
| | City | State | Zip Code | Transaction ID: R485100 |
| | Mars | PA | 16046 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 42.50 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | Aggregate | e Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 382.50 | |
|). | Full Name (Last, First, Middle Initial) Mr. Robert J. Varich, LUTCF | | | Date of Receipt |
| Mailing Address 5256 Country Lane | | | | 09 / 13 / Y Y Y Y Y Y |
| | City | State | Zip Code | Transaction ID: R485729 |
| | San Jose | CA | 95129 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 500.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Credit Card |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General Other (specify) ▼ | | 500.00 | |
| SI | JBTOTAL of Receipts This Page (optional) | | | 545.00 |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 149 / 173 (check only one) X |
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| Ar or | ny information copied from such Reports and Stat for commercial purposes, other than using the na | ements may ame and add | not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fitee | nancial A | dvisors Political Action Com | mit- |
| Α. | Full Name (Last, First, Middle Initial) Mr. Richard D. Vonderlage, CSA, LUTCF Mailing Address 15202 Sprague St City Omaha FEC ID number of contributing federal political committee. Name of Employer Self-employed | State NE C | Zip Code 68116 | Date of Receipt M M |
| | Receipt For: Primary General Other (specify) | Aggregate Aggregate | e Agent e Year-to-Date ▼ 378.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. Thomas D. Voshall Mailing Address 426 Towne Valley Dr City Woodstock FEC ID number of contributing federal political committee. | State GA | Zip Code 30188-2636 | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Occupation Insurance Aggregate | | Payroll Deduction |
| D . | Full Name (Last, First, Middle Initial) Ms. Sharon S. Walls, CLU,ChFC,L Mailing Address 1831 Frontier Rd City Bennington | State KS | Zip Code 67422-9063 | Date of Receipt M M M |
| | FEC ID number of contributing federal political committee. | C | 1 1 1 1 1 1 | 18.00 |
| | Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Occupation Insurance Aggregate | | Payroll Deduction |
| s | UBTOTAL of Receipts This Page (optional) | | | 85.00 |
| T | OTAL This Period (last page this line number on | lv) | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 150 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Ar or | y information copied from such Reports and Stateme for commercial purposes, other than using the name | ents may and add | not be sold or used by any perso lress of any political committee to | n for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\rangle}$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Finantee | ncial Ac | dvisors Political Action Com | nit- |
| A . | Full Name (Last, First, Middle Initial) Mr. Tom Wamberg, CLU Mailing Address 7 Fox Hunt Road City S Barrington III FEC ID number of contributing federal political committee. Name of Employer Self-employed Ins Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) | ccupation | Zip Code 60010-9603 Agent Year-to-Date ▼ | Date of Receipt M M O O O O O O O O O O O O O O O O O |
| 3. | Plainview T FEC ID number of contributing federal political committee. Name of Employer Self-employed Occ Ins | ccupation surance | Zip Code 79072-6625 Agent Year-to-Date ▼ 386.00 | Date of Receipt M M M |
| - | Simi Valley FEC ID number of contributing federal political committee. Name of Employer Self-employed Occ Ins | ccupation surance | Zip Code 93063-6026 93063-6026 Agent Year-to-Date ▼ | Date of Receipt M M M / 20 / 2007 Transaction ID: R485994 Amount of Each Receipt this Period 262.50 Credit Card |
| s | UBTOTAL of Receipts This Page (optional) | | _ | 812.50 |
| T | OTAL This Period (last page this line number only) | | > | |

| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | Check only one) |
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| ITEMIZED RECEIPTS | | or each category of the Detailed Summary Page | X 11a 11b 11c 12 |
| | | , , | 13 14 15 16 17 |
| Any information copied from such Reports and S or for commercial purposes, other than using the | Statements may e name and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions oscilcit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | | | |
| National Association of Insurance and tee | l Financial A | dvisors Political Action Com | mit- |
| Full Name (Last, First, Middle Initial) Ms. Carolyn R. Watson, LUTCF | | | Date of Receipt |
| Mailing Address 2032 Hollis | | | 09 10 2007 |
| City | State | Zip Code | Transaction ID: R482986 |
| Abilene | TX | 79605-5726 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 55.00 |
| Name of Employer Self-employed | Occupatio | | Payroll Deduction |
| Receipt For: | Insuranc Aggregate | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 193 194 | 460.00 |] |
| Full Name (Last, First, Middle Initial) 3. Mr. Charles A. Webb | | | Date of Receipt |
| Mailing Address 2516 Longview Ave. | | | 0 9 1 0 2 0 0 7 |
| City | State | Zip Code | Transaction ID: R482388 |
| Roanoke | VA | 24014 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 42.50 |
| Name of Employer Self-employed | Occupatio Insuranc | | Payroll Deduction |
| Receipt For: | | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 0 0 | 382.50 | |
| Full Name (Last, First, Middle Initial) Mr. S. Mark Weeks, LUTCF, CLU | <u> </u> | | Date of Receipt |
| Mailing Address 1389 South 500 East | | | 0 9 1 0 2 0 0 7 |
| City | State | Zip Code | Transaction ID: R485286 |
| Salt Lake City | UT | 84105-2043 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.00 |
| Name of Employer Self-employed | Occupatio Insuranc | | Payroll Deduction |
| Receipt For: | , . | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | | 400.00 | |
| SUBTOTAL of Receipts This Page (optional) | | | 122.50 |
| TOTAL This Period (last page this line number | only) | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 152 / 173 (check only one) X |
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| Ar or | ly information copied from such Reports and State for commercial purposes, other than using the na | ements may me and add | not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) National Association of Insurance and Fittee | nancial A | dvisors Political Action Com | mit- |
| Full Name (Last, First, Middle Initial) Mr. Matthew C. Weider, CLU,ChFC Mailing Address 6855 Compton Heights Circle | | | 7.0.4 | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City Clifton | State VA | Zip Code 20124 | Transaction ID: R482264 Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | LOTEY | 50.40 |
| | Name of Employer Self-employed Receipt For: Primary General Other (specify) ▼ | Occupation Insurance Aggregate | | Payroll Deduction |
| 3. | Full Name (Last, First, Middle Initial) Mr. Daniel J. Wells, LUTCF Mailing Address 18830 Los Hermanos Ranch Rd | | | Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| | City | Zip Code | Transaction ID: R483020 | |
| | Valley Center | State CA | 92082-6808 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 47.50 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 615.00 | |
| Full Name (Last, First, Middle Initial) 7. Mr. Daniel J. Wells, LUTCF | | | Date of Receipt | |
| Mailing Address 18830 Los Hermanos Ranch Rd | | | | 09 / 21 / Y Y Y Y Y Y |
| | City Valley Center | State CA | Zip Code | Transaction ID: R486050 |
| | Valley Center FEC ID number of contributing federal political committee. | CA | 92082-6808 | Amount of Each Receipt this Period 50.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Credit Card |
| | Receipt For: Primary General Other (specify) ▼ | Aggregate | e Year-to-Date ▼ 615.00 | |
| s | UBTOTAL of Receipts This Page (optional) | | | 147.90 |
| Т | OTAL This Period (last page this line number onl | v) | | |

| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER | R: PAGE 153 / 173 |
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| ITEMIZED RECEIPTS | | | or each category of the | (check only one) | |
| ••• | LIMIZED RECEIF 13 | | Detailed Summary Page | X 11a 11b | 11c 12 |
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| Ar | ny information copied from such Reports and St for commercial purposes, other than using the | atements may name and add | / not be sold or used by any perso dress of any political committee to | on for the purpose of soli solicit contributions fror | iciting contributions n such committee. |
| | NAME OF COMMITTEE (In Full) | | , | | |
| $ \rangle$ | National Association of Insurance and tee | dvisors Political Action Com | mit- | | |
| _ | Full Name (Last, First, Middle Initial) | | | | |
| A. | Mr. Marlin D. Wells, CLU, ChFC, | | | Date of Receipt | |
| | Mailing Address 2201 N. Washington | | | M M / D I | |
| | | | | 09 1 | |
| | City | | Zip Code | Transaction ID: | R482807 |
| | Roswell | NM | 88201-3377 | Amount of Each F | Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | | 30.00 |
| | Name of Employer | Occupation | 2 | Payroll Deductio | n |
| | Self-employed | Insurance | | | |
| | Receipt For: | | e Year-to-Date ▼ | | |
| | Primary General | 199.194.1 | | 1 | |
| | Other (specify) ▼ | | 270.00 | | |
| | | | | 1 | |
| | Full Name (Last, First, Middle Initial) | | | | |
| В. | | | | Date of Receipt | |
| | Mailing Address 2714 26th Ave SW | | | 0 9 1 | 0 2007 |
| | City | State | Zip Code | | |
| | Fargo | ND | 58103-5006 | Transaction ID: | |
| | | IND | 36103-3006 | Amount of Each F | Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | | 60.00 |
| | | | | Payroll Deduction | n |
| | Name of Employer Self-employed | Occupation | | l ayron Deductio | 11 |
| | | Insurance | | | |
| | Receipt For: Primary General | Aggregate | e Year-to-Date ▼ | | |
| | Primary General Other (specify) ▼ | | 540.00 | | |
| | Citiei (specify) | 0 0 | | J. | |
| | Full Name (Last, First, Middle Initial) | | | | |
| C. | Mr. John W. Wheeler, Jr. | | | Date of Receipt | |
| | Mailing Address 1075 Aster Ln. | | | M M / D I | |
| | | | | 09 2 | |
| | City | State | Zip Code | Transaction ID: | |
| | West Chicago | <u>IL</u> | 60185-1750 | Amount of Each F | Receipt this Period |
| | FEC ID number of contributing | С | | | 250.00 |
| | federal political committee. | | | | |
| | Name of Employer | Occupation | n | Credit Card | |
| | Self-employed | Insurance | e Agent | | |
| Primary General | | Aggregate | e Year-to-Date ▼ | | |
| | | ' ' | 250.00 | 1 | |
| | Other (specify) | 0 0 | | | |
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| _ | IIDTOTAL of Descints Title Boss (set 1) | | | | 340.00 |
| L | UBTOTAL of Receipts This Page (optional) | | ······ | - | |
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| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 154 / 173 |
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| TEMIZED RECEIPTS | | or each category of the | (check only one) |
| | | Detailed Summary Page | X 11a 11b 11c 12 13 14 15 16 17 |
| Any information copied from such Reports and S or for commercial purposes, other than using the | tatements may | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions |
| NAME OF COMMITTEE (In Full) | | | |
| National Association of Insurance and tee | Financial A | dvisors Political Action Com | mit- |
| Full Name (Last, First, Middle Initial) A. Mr. William T. Whitmore, Jr.,LUTCF | | | Date of Receipt |
| Mailing Address P. O. Box 4748 | | | 09 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R484644 |
| Virginia Beach | VA | 23454-0748 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | С | | 50.00 |
| Name of Employer Self-employed | Occupatio | | Payroll Deduction |
| | Insuranc | e Agent e Year-to-Date ▼ | _ |
| Receipt For: Primary General | Aggregate | e Year-lo-Dale V | 1 |
| Other (specify) ▼ | 0 0 | 500.00 | |
| Full Name (Last, First, Middle Initial) 3. Mr. Irv Wiese, CLU, ChFC, | | | Date of Receipt |
| Mailing Address 318 Stamford Bridge F | ld | | 0 9 1 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Transaction ID: R483194 | |
| Columbia | SC | 29212 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 42.00 |
| Name of Employer Self-employed | Occupatio Insuranc | | Payroll Deduction |
| Receipt For: | | e Year-to-Date ▼ | |
| Primary General | | 378.00 | 1 |
| Other (specify) ▼ | 0 0 | 378.00 | |
| Full Name (Last, First, Middle Initial) Mr. Michael J. Wilcox, LUTCF, CLTC | | | Date of Receipt |
| Mailing Address 117 Great Brook Rd. | | | 09 / 10 / Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R484992 |
| New Milford | CT | 06776-3039 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.00 |
| Name of Employer Self-employed | Occupatio Insuranc | | Payroll Deduction |
| Receipt For: | | e Year-to-Date ▼ | 7 |
| Primary General | | 221.00 | 1 |
| ☐ Other (specify) ▼ | | 0 0 0 0 0 0 | |
| SUBTOTAL of Receipts This Page (optional) | | | 117.00 |
| TOTAL This Period (last page this line number | only) | | |

| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 155 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Any or f | vinformation copied from such Reports and State or commercial purposes, other than using the r | atements may | not be sold or used by any perso dress of any political committee to | n for the purpose of soliciting contributions |
| | NAME OF COMMITTEE (In Full) National Association of Insurance and Face | inancial A | dvisors Political Action Com | mit- |
| A. | Full Name (Last, First, Middle Initial) Mr. Boyd Lee Williams Mailing Address 7023 W. Williamette Av City Kennewick FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: | State WA C Occupation Insurance | | Date of Receipt M M J D D J 2007 Transaction ID: R482935 Amount of Each Receipt this Period 208.00 Payroll Deduction |
| | Primary General Other (specify) | | 1048.00 | |
| 3. | Full Name (Last, First, Middle Initial) Mr. George W. Williams, Jr.,LUTCF Mailing Address 4109 Woodway Dr City Monroe FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State LA C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R481908 Amount of Each Receipt this Period 25.00 Payroll Deduction |
| . | Full Name (Last, First, Middle Initial) Mr. Joel K. Williamson, CLU, CSA,L Mailing Address 1750 Cord 16 City Tulia FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State TX C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: R484968 Amount of Each Receipt this Period 30.00 Payroll Deduction |
| SL | JBTOTAL of Receipts This Page (optional) | | ······• | 263.00 |
| TC | OTAL This Period (last page this line number o | nly) | | |

| SCHEDULE A (FEC Form 3X) | | Llea coparata cabadula(c) | FOR LINE NUMBER: PAGE 156 / 173 |
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| Any information copied from such Reports and or for commercial purposes, other than using the | Statements mag e name and add | y not be sold or used by any perso dress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full) | | | |
| National Association of Insurance and tee | d Financial A | dvisors Political Action Com | mit- |
| Full Name (Last, First, Middle Initial) Mr. Cliff F. Wilson, CLU, ChFC, | | | Date of Receipt |
| Mailing Address 1458 W. Bahia Court | | | 09 10 2007 |
| City | State | Zip Code | Transaction ID: R482476 |
| Gilbert | AZ | 85233-5600 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 126.00 |
| Name of Employer Self-employed | Occupatio Insuranc | | Payroll Deduction |
| Receipt For: | | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 0 0 | 1134.00 | |
| Full Name (Last, First, Middle Initial) 3. Mr. Randall C. Wimsatt, LUTCF | | | Date of Receipt |
| Mailing Address 2460 E 20th St | | | 09 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R485178 |
| Farmington | NM | 87401-4402 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.20 |
| Name of Employer Self-employed | Occupatio Insuranc | | Payroll Deduction |
| Receipt For: | | e Year-to-Date V | _ |
| Primary General | | 226.80 | 1 |
| Other (specify) | 0 0 | 220.00 | |
| Full Name (Last, First, Middle Initial) Mr. L. Nelson Wingert, CLU | | | Date of Receipt |
| Mailing Address 418 Gettysburg Pike | | | M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| City | State | Zip Code | Transaction ID: R483065 |
| Mechanicsburg | PA | 17055-5170 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | | 25.00 |
| Name of Employer Self-employed | Occupatio Insuranc | | Payroll Deduction |
| Receipt For: | | e Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 0 0 | 225.00 | |
| SUBTOTAL of Receipts This Page (optional) . | | | 176.20 |
| ODITAL OF HOSCIPIO THIS LAYE (OPHOLIA). | | ······ | |
| TOTAL This Period (last page this line number | r only) | | |

| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: PAGE 157 / 173 |
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| Δ, | ay information copied from such Poports and Stat | omonte may | y not be cold or used by any pers | |
| or | ny information copied from such Reports and Stat for commercial purposes, other than using the na | ame and ado | dress of any political committee to | o solicit contributions from such committee. |
| \setminus | NAME OF COMMITTEE (In Full) | | | |
| | National Association of Insurance and Fitee | nancial Ad | dvisors Political Action Com | mit- |
| A. | Full Name (Last, First, Middle Initial) Mr. Larry J. Winkelhake, CLU, ChFC | | | Date of Receipt |
| | Mailing Address 18600 Longview Ct | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R484668 |
| | Brookfield | WI | 53045 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | С | | 90.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | Year-to-Date ▼ | |
| | Primary General | | | 1 |
| | Other (specify) ▼ | | 810.00 | |
| В. | Full Name (Last, First, Middle Initial) Mr. Benjamin Bunn Woodard, Jr. | | | Date of Receipt |
| ٥. | Mailing Address 109 Bristol Court | | | M M / D D / Y Y Y Y |
| | | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R483041 |
| | Rocky Mount | NC | 27803-1203 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 46.75 |
| | receiai politicai committee. | | | Payroll Deduction |
| | Name of Employer Self-employed | Occupation | | Payron Deduction |
| | | Insurance | | |
| | Receipt For: Primary General | Aggregate | Year-to-Date ▼ | - |
| | Other (specify) | | 420.75 | |
| | | | | 1 |
| C. | Full Name (Last, First, Middle Initial) Mr. Mark L. Yavornitzki, CAE | | | Date of Receipt |
| ٠. | Mailing Address 14 Bridle Pl. | | | M M / D D / Y Y Y Y |
| | | | | 09 10 2007 |
| | City | State | Zip Code | Transaction ID: R485531 |
| | E. Greenbush | NY | 12061-1111 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | C | | 25.00 |
| | Name of Employer Self-employed | Occupation Insurance | | Payroll Deduction |
| | Receipt For: | | e Agent • Year-to-Date ▼ | - |
| | Primary General | 7.99.094.0 | | 7 |
| | Other (specify) ▼ | | 225.00 | |
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| s | SUBTOTAL of Receipts This Page (optional) | | | 161.75 |
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| SCHEDULE A (FEC Form 3X) | | | Use separate schedule(s) | FOR LINE NUMBER: | PAGE 158 / 173 | | |
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| | NAME OF COMMITTEE (In Full) | | 7, | | | | |
| $ \rangle$ | National Association of Insurance and Fir | nancial Ad | dvisors Political Action Com | nit- | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | |
| Α. | Mr. Dan Yost, CLU, LUTCF | | | Date of Receipt | | | |
| | Mailing Address 724 E. 7th St. | | | 0 9 1 4 | 2007 | | |
| | City | State | Zip Code | Transaction ID: R4 | | | |
| | Hastings | NE | 68901-7602 | Amount of Each Red | | | |
| | | | 00301 7002 | Amount of Lacif Net | elpt triis r eriou | | |
| | FEC ID number of contributing federal political committee. | C | | | 21.00 | | |
| | Name of Employer | Occupation | 1 | Cash | | | |
| | Self-employed | Insurance | | | | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | | | | |
| | Primary General | · · · | 208.50 | | | | |
| | Other (specify) | | | | | | |
| _ | Full Name (Last, First, Middle Initial) | | | | | | |
| В. | | | | Date of Receipt | | | |
| | Mailing Address 104 Clay Ct. | | | M M / D D | / Y Y Y Y | | |
| | | | | 09 10 | 2007 | | |
| | City | State | Zip Code | Transaction ID: R4 | 85514 | | |
| | Landenberg | PA 19350 | | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing | С | | | 105.00 | | |
| | federal political committee. | 0 | | | | | |
| | Name of Employer Self-employed | Occupation | 1 | Payroll Deduction | | | |
| | Self-employed * | Insurance | e Agent | | | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | | | | |
| | Primary General | · · · | 995.00 | | | | |
| | Other (specify) | | 333.00 | | | | |
| | Full Name (Lock First Middle Letter) | | | | | | |
| C. | Full Name (Last, First, Middle Initial) Mr. Edward A. Zabielski, Jr. | | | Date of Receipt | | | |
| | Mailing Address 104 Clay Ct. | | | M M / D D | / Y Y Y Y | | |
| | | | | 09 24 | 2007 | | |
| | City | State | Zip Code | Transaction ID: R4 | 86137 | | |
| | Landenberg | PA | 19350 | Amount of Each Rec | eipt this Period | | |
| | FEC ID number of contributing | С | | | 50.00 | | |
| | federal political committee. | | | | | | |
| | Name of Employer | Occupation | 1 | Credit Card | | | |
| | Self-employed | Insurance | e Agent | | | | |
| | Receipt For: | Aggregate | Year-to-Date ▼ | | | | |
| | Primary General | | 995.00 | 1 | | | |
| | Other (specify) | | 333.00 | | | | |
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| | CHEDULE A (FEC Form 3X) EMIZED RECEIPTS | | Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 159 / 173 (check only one) X 11a 11b 11c 12 13 14 15 16 17 |
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| Any or f | r information copied from such Reports and Sta or commercial purposes, other than using the n | tements may ame and ado | not be sold or used by any persodress of any political committee to | on for the purpose of soliciting contributions solicit contributions from such committee. |
| | NAME OF COMMITTEE (In Full) National Association of Insurance and F | inancial Ad | dvisors Political Action Com | mit- |
| A. | Full Name (Last, First, Middle Initial) Mr. Charles D. Zaleski, CLU, ChFC Mailing Address 28400 Ridgethorne Ct City Rancho Palos Verde FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State CA C Occupation Insurance Aggregate | | Date of Receipt M M J D D J Z D D 7 Transaction ID: R484748 Amount of Each Receipt this Period 42.00 Payroll Deduction |
| 3. | Full Name (Last, First, Middle Initial) Mr. Alan R. Zalewski, CLU, ChFC, Mailing Address 6908 North 27th Street City Tacoma FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State WA C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| . | Full Name (Last, First, Middle Initial) Mr. Theodore J. Zouzounis, CLU Mailing Address 820 Mariposa Rd City Lafayette FEC ID number of contributing federal political committee. Name of Employer Self-employed Receipt For: Primary General Other (specify) | State CA C Occupation Insurance Aggregate | | Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| SL | JBTOTAL of Receipts This Page (optional) | | ······ | 134.50 |
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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 160 / 173 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c Detailed Summary Page 13 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Insurance and Financial Advisors Political Action Commit-Full Name (Last, First, Middle Initial) Mr. H. Keith de Noble, LUTCF, CLU Date of Receipt Mailing Address 13200 W Markham Street, Suite 105 09 10 200.7 City State Zip Code Transaction ID: R485196 Little Rock AR 72211-3285 Amount of Each Receipt this Period FEC ID number of contributing C 36.00 federal political committee. Payroll Deduction Name of Employer Self-employed Occupation Insurance Agent Receipt For: Aggregate Year-to-Date ▼ Primary General 276.00 Other (specify)

| SUBTOTAL of Receipts This Page (optional) | • | 36.00 |
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| TOTAL This Period (last page this line number only) | • | 46174.60 |

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| 5 | CHEDULE B (FEC Form 3X) | Use seperate schedule(s) | | NUMBER: | PAGE | 161 / 1 | 73 |
| IT | EMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | (check onlocation X 21b 27 | 22 23 | 24 28c | 25 29 | 26 30b |
| | y Information copied from such Reports and Staten for commercial purposes, other than using the nam | | | | - | | |
| $\overline{\ \ }$ | NAME OF COMMITTEE (In Full) | | | | | | |
| | National Association of Insurance and Finatee | ancial Advisors Political Ac | tion Commi | it- | | | |
| _ | Full Name (Last, First, Middle Initial) | | | Transaction ID: D94 | 498 | | |
| ٩. | First Union Bank | Date of Disbursement | | | | | |
| | Mailing Address One First Union Center | | | 09 / 28 | / Y 2 | 0 0 7 | |
| | City Charlotte | State Zip Code NC 28288-1164 | | Amount of Each Disb | | | |
| | Purpose of Disbursement Bank Charges | | | | 580.59 |) | |
| | Candidate Name | | Category/ Type | | | | |
| | Office Sought: House Disburse Senate President | ement For: Primary General Other (specify) ▼ | | | | | |
| | State: District: | | | | | | |

| SUBTOTAL of Disbursements This Page (optional) | • | 580.59 |
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| Τ | EMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | | 21b | <u> </u> | 22 28a | X 23 28b | \Box | 24 28c | ш | 25 29 | _ | 26 80b |
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| OI 1 | or commercial purposes, other than using the name | e and address of any political | COIIII | muee u | SOIIC | it Contint | DULIONS | 110111 5 | ucii cc | ווווווו | liee | | |
| | National Association of Insurance and Finatee | ancial Advisors Political | Actio | n Com | ımit- | | | | | | | | |
| | Full Name (Last, First, Middle Initial) | | | | | Transa | ction II | D : D9 | 449 | | | | |
| ٩. | Bachmann for Congress | | | | | | Disbur | | nt | | | v | |
| | Mailing Address PO Box 49756 | | | | | 0 ^M 9 M | / D | 14 | / L | Ž (|) Ď 7 | Y | |
| | City Blaine | State Zip Code MN 55449 | | | | Amoun | t of Eac | ch Disl | oursen | nent | this Pe | eriod | |
| | Purpose of Disbursement | MN 55449 | | | | | | | | 15 | 500.0 | 0 | 1 |
| | Contr. Michele Bachmann (MN-6-R-US | | | | | | | | | Α | - | | |
| | Candidate Name Michele Bachmann | | | tegory/ ype | | | | | | | | | |
| | Senate X President | ement For: 2008 Primary General Other (specify) | | | | House) |) | | | | | | |
| | State: MN District: 06 | | | | | | | | | | | | |
| 3. | Full Name (Last, First, Middle Initial) Boyd For Congress | | | | | Transa | ction II Disbur | | | | | | |
| | | | | | | M M | | | / Y | Y |) 0 7 | Υ | |
| | Mailing Address PO Box 15703 | | | | | 0 9 | | 25 | L | 2 (| 007 | | |
| | City Tallahassee | State Zip Code FL 32317 | | | | Amoun | t of Eac | ch Disl | oursen | nent ' | this Pe | eriod | |
| | Purpose of Disbursement | | | | 1 | | | | | 10 | 0.00 | 0 | |
| | Contr. Allen Boyd (FL-2-D-US House) | | L | | | | | | | | | | |
| | Candidate Name Allen Boyd | | | tegory/ ype | | | | | | | | | |
| | ů X | ement For: 2008 Primary General Other (specify) | | | | | | | | | | | |
| | State: FL District: 02 | | | | | | | | | | | | |
| Э. | Full Name (Last, First, Middle Initial) Chambliss for Senate | | | | | Transa Date of | | | | | | | |
| | Mailing Address Post Office Box 12469 | | | | | 0 ^M 9 M | / D | 14 | / Y | ž (|) Ď 7 | Y | |
| | City Atlanta | State Zip Code GA 30355 | | | | Amoun | t of Eac | h Disl | oursen | nent | this Pe | eriod | _ |
| | Purpose of Disbursement Contr. Saxby Chambliss (GA-R-US Senate) | | | | 1 | | | | | 25 | 500.0 | 0 | |
| | Candidate Name Saxby Chambliss | | | tegory/ ype | 1 | | | | | | | | |
| | · - | ement For: 2008 | | | | | | | | | | | |
| | President | Primary General Other (specify) ▼ | | | | | | | | | | | |
| | State: GA District: | | | | | | | | | | | | _ |
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| <u>ا</u> ر | CHEDULE B (FEC FOIIII 3X) | Use seperate schedule(s) | | OR LINE N | | l: | PA | AGE | 163 / | 173 |
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| \rangle | NAME OF COMMITTEE (In Full) National Association of Insurance and Finatee | , , , , | | | | | | | | |
| ۹. | Full Name (Last, First, Middle Initial) Congressman Bart Gordon Committe Mailing Address P.O. Box 2008 | | | | | ction ID: Disburse | | Ý Ž (|) ŏ 7 | Y |
| | City | State Zip Code | | | Amoun | t of Each | Disburse | ement | this Pe | eriod |
| | Murfreesboro Purpose of Disbursement Contr. Bart Gordon (TN-6-D-US House) | TN 37133 | | | | | | 10 | 0.00 | 0 |
| | Candidate Name Bart Gordon | | Categ | - | | | | | | |
| | · — | ment For: 2008 Primary General Other (specify) | | | | | | | | |
| 3. | Full Name (Last, First, Middle Initial) Dan Burton for Congress | | | | | ction ID: Disburse | - | | | |
| | Mailing Address Box 50593 | | | | 0 ^M 9 M | / D2 | 5 / | ž (|) Ď 7 | Y |
| | , | State Zip Code IN 46250 | | | Amoun | t of Each | Disburse | | | - |
| | Purpose of Disbursement Contr. Dan Burton (IN-5-R-US House) Candidate Name | | Categ | uon/ | L. | | | 1(| 0.00 | 0 |
| | Dan Burton | | Тур | - | | | | | | |
| | | ment For: 2008 Primary General Other (specify) | | | | | | | | |
| Э. | Full Name (Last, First, Middle Initial) Darlene Hooley for Congress | | | | | ction ID: Disburse | | | | |
| | Mailing Address PO Box 2050 | | | | 0 ^M 9 M | [/] 2 | 5 / | ž |) Ď 7 | Y |
| | Salem | State Zip Code OR 97308 | | | Amoun | t of Each | Disburse | | this Pe | |
| | Purpose of Disbursement Contr. Darlene Hooley (OR-5-D-US House) Candidate Name | | Categ | iory/ | | | | | 0.00 | U |
| | Darlene Hooley | | Тур | - | | | | | | |
| | X | ment For: 2008 Primary General Other (specify) | | | | | | | | |
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| \rangle | NAME OF COMMITTEE (In Full) National Association of Insurance and Finatee | | | | |
| Α. | Full Name (Last, First, Middle Initial) Donald Manzullo for Congress | | | Transaction ID: D9447 Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | Y |
| | Mailing Address PO Box 7783 | | | 09 14 2007 | |
| | City Rockford | State Zip Code IL 61126 | | Amount of Each Disbursement this P | |
| | Purpose of Disbursement Contr. Donald A. Manzullo (IL-16-R-US | | 0 0 | 2500.0 | 0 |
| | Candidate Name Donald A. Manzullo | | Category/ Type | | |
| | | ement For: 2008 Primary General Other (specify) | | House) | |
| 3. | Full Name (Last, First, Middle Initial) Friends of Jim Saxton | | | Transaction ID: D9443 Date of Disbursement | |
| | Mailing Address PO Box 795 | | | $\begin{bmatrix} 0 & 9 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 0 & 4 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 \end{bmatrix}$ $\begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 \end{bmatrix}$ | Y |
| | City Mount Holly | State Zip Code NJ 08060 | | Amount of Each Disbursement this P | |
| | Purpose of Disbursement Contr. James Saxton (NJ-3-R-US House) | | | 1000.0 | 0 |
| | Candidate Name James Saxton | | Category/ Type | | |
| | X | ement For: 2008 Primary General Other (specify) | | | |
| Э. | Full Name (Last, First, Middle Initial) Hastings for Congress Comm. | | | Transaction ID: D9451 Date of Disbursement | |
| | Mailing Address P.O. Box 2926 | | | $\begin{bmatrix} M & M & 1 & D & 1 & A & 1 \end{bmatrix}$ | Υ |
| | City Pasco | State Zip Code WA 99302 | | Amount of Each Disbursement this P | eriod |
| | Purpose of Disbursement Contr. Richard Hastings (WA-4-R-US | | | 1000.0 | 0 |
| | Candidate Name Richard Hastings | | Category/ Type | | |
| | X | ement For: 2008 Primary General Other (specify) | | House) | |
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| NAME OF COMMITTEE (In Full) National Association of Insurance and Fin tee | ancial Advisors Political Ac | tion Commi | t- | | | |
| Full Name (Last, First, Middle Initial) | | | Transactio | n ID : D9460 | | |
| Lewis for Congress Committee | | | Date of Disl | | | |
| Mailing Address P.O. Box 247 | | | 09 4 | 24 | žoŏ7 | Y |
| City Redlands | State Zip Code CA 92373 | | Amount of E | Each Disburse | ement this F | eriod |
| Purpose of Disbursement | UA 92373 | | | | 2500.0 | 00 |
| Contr. Jerry Lewis (CA-41-R-US House) | | | | | | |
| Candidate Name Jerry Lewis | | Category/ Type | | | | |
| The state of the s | ement For: 2008 Primary General Other (specify) | | | | | |
| State: CA District: 41 | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | n ID : D9469 | | |
| 3. Lindsey Graham for Senate | | | Date of Disl | | | V |
| Mailing Address PO Box 1155 | | | 0 9 4 | 24 | Ž 0 Ŏ 7 | Y |
| City Seneca | State Zip Code SC 29679 | | Amount of E | Each Disburse | ement this F | eriod |
| Purpose of Disbursement | | • | | | 2500.0 | 00 |
| Contr. Lindsey O. Graham (SC-R-US Candidate Name | | Catagony | | | | |
| Lindsey O. Graham | | Category/ Type | | | | |
| • - | ement For: 2008 Primary General Other (specify) | | Senate) | | | |
| State: SC District: | | | | | | |
| Full Name (Last, First, Middle Initial) McHenry for Congress | | | Transaction Date of Disl | n ID: D9475 oursement | | |
| Mailing Address P.O. Box 360 | | | 0 9 4 | 25 | ž 0 ŏ 7 | Y |
| City Cherryville | State Zip Code NC 28021 | | Amount of E | Each Disburse | ement this F | Period |
| Purpose of Disbursement Contr. Patrick T. McHenry (NC-10-R-US | 1 | | | | 1000.0 | 00 |
| Candidate Name Patrick T. McHenry | | Category/ Type | | | | |
| | ement For: 2008 Primary General Other (specify) | | House) | | | |
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| ITEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | (check only 21b 27 | 22 X 23 24 28a 28b 28c | 25 26 29 30b |
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| NAME OF COMMITTEE (In Full) National Association of Insurance and Finatee | | | | |
| Full Name (Last, First, Middle Initial) Meeks for Congress Mailing Address 219-10 South Conduit Av | enue | | Transaction ID: D9470 Date of Disbursement | ž 0 0 7 ° |
| | | | Amount of Fools Dishurson | ant this Davied |
| , | State Zip Code NY 11413 | | Amount of Each Disburseme | |
| Purpose of Disbursement Contr. Gregory W. Meeks (NY-6-D-US | Γ | | | 2500.00 |
| Candidate Name Gregory W. Meeks | | Category/ Type | | |
| | nent For: 2008 Primary General Other (specify) | | House) | |
| Full Name (Last, First, Middle Initial) | | | Transaction ID: D9454 | |
| Melissa Bean for Congress | | | Date of Disbursement | ž 0 0 7 |
| Mailing Address PO Box 3068 | | | 0 9 1 4 | 2007 |
| , | State Zip Code IL 60011 | | Amount of Each Disburseme | ent this Period |
| Purpose of Disbursement Contr. Melissa L. Bean (IL-8-D-US House) | | | | 2500.00 |
| Candidate Name Melissa L. Bean | C | Category/ Type | | |
| Office Sought: X House Senate X President State: IL District: 08 | ment For: 2008 Primary General Other (specify) | | | |
| Full Name (Last, First, Middle Initial) Mike Ross for Congress Committee | | | Transaction ID: D9477 Date of Disbursement | |
| Mailing Address PO Box 360 | | | $\begin{bmatrix} 0 & 9 & M \end{bmatrix}$ | 2007 |
| , | State Zip Code AR 71857 | | Amount of Each Disburseme | ent this Period |
| Purpose of Disbursement Contr. Michael A. Ross (AR-4-D-US House) | | • | | 1000.00 |
| Candidate Name Michael A. Ross | | Category/ Type | | |
| Office Sought: X House Senate President State: AR District: 04 Disburse | ment For: 2008 Primary General Other (specify) | | | |
| SUBTOTAL of Disbursements This Page (optional) . | | | | 6000.00 |
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| TEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | (check only of 21b 27 | 22 X 23 24 2 | 25 26 29 30b |
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| NAME OF COMMITTEE (In Full) National Association of Insurance and Finatee | <u> </u> | | | |
| Full Name (Last, First, Middle Initial) New Republican Majority Fund Mailing Address 3001 Park Center Drive, S | Suito 1105 | | Transaction ID: D9464 Date of Disbursement |) |
| | | | | |
| , | State Zip Code VA 22302 | | Amount of Each Disbursement t | this Period |
| Purpose of Disbursement Contr. New Republican Majority F (PAC to | | | | 00.00 |
| Candidate Name | | ategory/ Type | | |
| Office Sought: Senate President State: Disburse X Annual | nent For: 2007 Primary General Other (specify) | | PAC) | |
| Full Name (Last, First, Middle Initial) | | | Transaction ID: D9442 | |
| Pallone for Congress Committee | | | Date of Disbursement | YY |
| Mailing Address PO Box 3176 | | | 0 9 0 4 2 0 |) Ď 7 [×] |
| , | State Zip Code NJ 07740 | | Amount of Each Disbursement to | this Period |
| Purpose of Disbursement Contr. Frank Pallone, Jr. (NJ-6-D-US | | | . 10 | 00.00 |
| Candidate Name Frank Pallone, Jr. | | ategory/ Type | | |
| Office Sought: X House Senate President State: NJ District: 06 | nent For: 2008 Primary General Other (specify) | | House) | |
| Full Name (Last, First, Middle Initial) - Pearce for Congress | | | Transaction ID: D9476 Date of Disbursement | |
| Mailing Address PO Box 2696 | | | $\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix}$ | o o o o o |
| , | State Zip Code NM 88241 | | Amount of Each Disbursement | this Period |
| Purpose of Disbursement Contr. Stevan E. Pearce (NM-2-R-US | | • | 10 | 00.00 |
| Candidate Name Stevan E. Pearce | | ategory/ Type | | |
| Office Sought: X House Senate President State: NM District: 02 | nent For: 2008 Primary General Other (specify) | | House) | |
| SUBTOTAL of Disbursements This Page (optional) . | | ▶ | 70 | 00.00 |
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| TEMIZED DISBURSEMENTS | for each category of the Detailed Summary Page | (check only | 22 X 23 24 28a 28b 28c | 25 26 29 30b |
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| NAME OF COMMITTEE (In Full) National Association of Insurance and Finatee | · · · · · · · · · · · · · · · · · · · | | | |
| Full Name (Last, First, Middle Initial) Pennsylvanians for Kanjorski | | | Transaction ID: D9462 Date of Disbursement | 2 2 0 0 7 |
| Mailing Address 103 South Hanover Stree | | | | 2007 |
| | State Zip Code PA 18634 | | Amount of Each Disburs | sement this Period |
| Purpose of Disbursement Contr. Paul E. Kanjorski (PA-11-D-US | | | | 5000.00 |
| Candidate Name Paul E. Kanjorski | | Category/ Type | | |
| | ment For: 2008 Primary General Other (specify) | | House) | |
| Full Name (Last, First, Middle Initial) | | | Transaction ID: D9468 | |
| 3. Price for Congress | | | Date of Disbursement | Y · Y · Y |
| Mailing Address P.O. Box 425 | | | 0 9 2 4 | ^Y 2007 ^Y |
| , | State Zip Code GA 30077 | | Amount of Each Disburs | |
| Purpose of Disbursement Contr. Thomas E. Price, M.D. (GA-6-R-US | | • | | 1000.00 |
| Candidate Name Thomas E. Price, M.D. | | Category/ Type | | |
| X | ment For: 2008 Primary General Other (specify) | | House) | |
| Full Name (Last, First, Middle Initial) - Reynolds for Congress | | | Transaction ID: D9444 Date of Disbursement | 1 |
| Mailing Address PO Box 15388 Pittsford | | | 09 / 04 / | 2007 |
| City | State Zip Code NY 14615 | | Amount of Each Disburs | |
| Purpose of Disbursement Contr. Thomas M. Reynolds (NY-26-R-US | Purpose of Disbursement | | | 2500.00 |
| Candidate Name Thomas M. Reynolds | | Category/ Type | | |
| Office Sought: X House Senate President State: NY District: 26 Disburse | ment For: 2008 Primary General Other (specify) | | House) | |
| SUBTOTAL of Disbursements This Page (optional) . | | | | 8500.00 |
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| \rangle | NAME OF COMMITTEE (In Full) National Association of Insurance and Finatee | , , , , , , , , , , , , , , , , , | | | |
| ۹. | Full Name (Last, First, Middle Initial) Richard Burr Committee Mailing Address P.O. Box 5928 | | | Transaction Date of Disb | |
| | • | State Zip Code | | Amount of E | ach Disbursement this Period |
| | Winston-Salem Purpose of Disbursement | NC 27113 | Ι | | 2000.00 |
| | Contr. Richard M. Burr (NC-R-US Senate) | | | | |
| | Candidate Name Richard M. Burr | | Category/ Type | | |
| | | ment For: 2010 Primary General Other (specify) | | | |
| 3. | Full Name (Last, First, Middle Initial) Rob Andrews For Congress | | | Transaction Date of Disb | |
| | Mailing Address Ellisburg Plaza 20 Brace Street, Suite 20 | n | | 0 9 M | 14 / 2007 |
| | City | State Zip Code NJ 08034 | | Amount of E | ach Disbursement this Period |
| | Purpose of Disbursement Contr. Robert E. Andrews (NJ-1-D-US | | | 7 L | 1500.00 |
| | Candidate Name Robert E. Andrews | | Category/ Type | 1 | |
| | | ment For: 2008 Primary General Other (specify) | | House) | |
| Э. | Full Name (Last, First, Middle Initial) Rodney Alexander for Congress | | | Transaction Date of Disb | |
| | Mailing Address PO Box 367 319 Nancy Road | | | 09 / | 14 4 2007 |
| | City | State Zip Code LA 71268 | | Amount of E | ach Disbursement this Period |
| | Purpose of Disbursement Contr. Rodney Alexander (LA-5-R-US | | | 7 L | 1000.00 |
| | Candidate Name Rodney Alexander | | Category/ Type | 1 | |
| | X III | ment For: 2008 Primary General Other (specify) | | House) | |
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| \rangle | NAME OF COMMITTEE (In Full) National Association of Insurance and Finatee | • | | | | | | | | |
| ۹. | Full Name (Last, First, Middle Initial) Ryan for Congress | | | | Date o | action ID: | | Y ~ Y | 0 ŏ 7 | Y |
| | Mailing Address P. O. Box 1919 | | | | 0.5 | | - | | 0 0 7 | |
| | • | State Zip Code WI 53547 | | | Amou | nt of Each | Disburse | ement | this P | eriod |
| | Purpose of Disbursement Contr. Paul Ryan (WI-1-R-US House) | | | | | | | 50 | 0.00 | 0 |
| | Candidate Name Paul Ryan | | | tegory/ ype | | | | | | |
| | Office Sought: X House Senate President State: WI District: 01 | ment For: 2008 Primary X General Other (specify) | | | | | | | | |
| 3. | Full Name (Last, First, Middle Initial) | | | | | action ID: | | | | |
| | Shelley Moore Capito for Congress | | | | Date of Disbursement 0 9 2 6 2 0 0 7 | | | | | |
| | Mailing Address P.O. Box 11519 | | | | 0.9 | | . 0 | | 007 | |
| | | State Zip Code WV 25339 | | | Amou | nt of Each | Disburse | | | |
| | Purpose of Disbursement Contr. Shelley Moore Capito (WV-2-R-US | | | | 1000.0 | | | | | 0 |
| | Candidate Name Shelley Moore Capito | | | tegory/ ype | | | | | | |
| | | ment For: 2008 Primary General Other (specify) | | | House | e) | | | | |
|).). | Full Name (Last, First, Middle Initial) Spratt for Congress Committee | | | | | action ID: | | | | |
| | | | | | 0 9 | of Disburs | oment 3 | YYY | 0 ŏ 7 | Υ |
| | Mailing Address PO Box 830 | | | | 0.3 | | | | 0 0 7 | |
| | | State Zip Code SC 29745 | | | Amou | nt of Each | Disburse | - | | |
| | Purpose of Disbursement Contr. John M. Spratt, Jr. (SC-5-D-US | | | | | | | 4(| 0.00 | 0 |
| | Candidate Name John M. Spratt, Jr. | | | tegory/ ype | | | | | | |
| | | ment For: 2008 Primary General Other (specify) | | | House | e) | | | | |
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| National Association of Insurance and Fin- | ancial Advisors Political Ac | tion Comn | nit- | | | |
| Full Name (Last, First, Middle Initial) | | | Transaction ID: | 9466 | | |
| Steve Rothman for Congress | | | Date of Disbursen | | | |
| Mailing Address Post Office Box 714 | | | 09 / 24 | 2007 | | |
| City | State Zip Code | | Amount of Each D | isbursement this Period | | |
| Hackensack | NJ 07602 | | _ | 1000.00 | | |
| Purpose of Disbursement Contr. Steven R. Rothman (NJ-9-D-US | | | | 1000.00 | | |
| Candidate Name Steven R. Rothman | | Category/ Type | | | | |
| Senate X President | ment For: 2008 Primary General Other (specify) | | House) | | | |
| State: NJ District: 09 | | | | | | |
| Full Name (Last, First, Middle Initial) Fundame (Last, First, Middle Initial) Texans for Henry Cuellar Congressional C | ampaign | | Transaction ID: Date of Disbursem | | | |
| | M M / D D / Y Y Y Y | | | | | |
| Mailing Address 1520 Victoria St., Suite 1 | | | | | | |
| City Laredo | State Zip Code TX 78042 | | Amount of Each D | isbursement this Period | | |
| Purpose of Disbursement | | • • | 1000.00 | | | |
| Contr. Henry Cuellar (TX-28-D-US House) | | | | | | |
| Candidate Name Henry Cuellar | | Category/ Type | | | | |
| Senate X President | ment For: 2008 Primary General Other (specify) | | | | | |
| State: TX District: 28 | | | | | | |
| Full Name (Last, First, Middle Initial) The Reed Committee | | | Transaction ID: Date of Disbursen | nent | | |
| Mailing Address PO Box 8628 | | | 09 / 24 | 2007 | | |
| City Cranston | State Zip Code RI 02920 | | Amount of Each D | isbursement this Period | | |
| Purpose of Disbursement Contr. Jack Reed (RI-D-US Senate) | | • | | 1000.00 | | |
| Candidate Name Jack Reed | | Category/ Type | | | | |
| Office Sought: House Disburse X Senate President State: RI District: | ment For: 2008 Primary X General Other (specify) | | | | | |
| SUBTOTAL of Disbursements This Page (optional) | | | | 3000.00 | | |
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| Name of Committee (in Full) National Association of Insurance and Finatee | ancial Advisors Political Ac | tion Commi | t- | | | | |
| Full Name (Last, First, Middle Initial) | | | Transact | ion I D : D94 | 165 | | |
| Tom Davis For Congress | | | | isbursemen | | | V. |
| Mailing Address P.O. Box 483 | | | 0 9 | ^D 24 | ′ <u>'</u> 2 | 0 0 7 | |
| , | State Zip Code | | Amount o | of Each Disb | ursemen | t this P | eriod |
| Dunn Loring Purpose of Disbursement | VA 22027 | | | | 2 | 2500.0 | 0 |
| Contr. Thomas M. Davis, III (VA-11-R-US | | | - | | | | |
| Candidate Name Thomas M. Davis, III | | Category/ Type | | | | | |
| Senate X President | ment For: 2008 Primary General Other (specify) | | House) | | | | |
| State: VA District: 11 Full Name (Last, First, Middle Initial) | | | | | | | |
| 3. Volunteers for Shimkus | | | Date of D | ion ID: D94 | t | | V. |
| Mailing Address P.O. Box 5458 | | | 09 | 25 | Ž | 0 Ď 7 | <u> </u> |
| City Springfield | State Zip Code IL 62705 | | Amount o | of Each Disb | | | - |
| Purpose of Disbursement Contr. John M. Shimkus (IL-19-R-US | | | | | 2 | 2500.0 | 0 |
| Candidate Name John M. Shimkus | | Category/ Type | | | | | |
| | ment For: 2008 Primary General Other (specify) | | House) | | | | |
| Full Name (Last, First, Middle Initial) Whitehouse for Senate | | | | ion ID: D94 | | | |
| Mailing Address PO Box 40280 | | | 0 9 M | ^D 26 | / Y 2 | 0 0 7 | Y |
| City Providence | State Zip Code RI 02940 | | Amount o | of Each Disb | oursemen | t this Po | eriod |
| Purpose of Disbursement Contr. Sheldon Whitehouse (RI-D-debt | | • • | | | Ę | 5000.0 | 0 |
| Candidate Name Sheldon Whitehouse | | Category/ Type | | | | | |
| Office Sought: House Disburse X Senate President State: RI District: | ment For: 2006 Primary X General Other (specify) | | retireme | nt-US Sen | ate) | | |
| SUBTOTAL of Disbursements This Page (optional) | | | | | 10 | 0.000 | 0 |
| TOTAL This Period (last page this line number only) | | | | | 69 | 0.00 | 0 |

(Use separate

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| DEBTS AND OBLIGATIONS Excluding Loans | | schedule(s) for each numbered line) | FOR LINE NUMBER: (check only one) 9 | | | | | |
|--|------------------------|---|--|--|--|--|--|--|
| NAME OF COMMITTEE (In Full) National Association of Insurance and Financial Advisors Political Action Committee | | | | | | | | |
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor NAIFA Mailing Address 2901 Telestar Court | | | Nature of Debt (Purpose): Payroll, Benefits, Supplies, Copies, etc | | | | | |
| City State Falls Church VA | ZIP Code 22042-1205 | | | | | | | |
| Outstanding Balance Beginning This Period 60793.02 Amount Incurred This Period | Payment This Period | | nsaction ID: DD#7711 ng Balance at Close of This Period | | | | | |
| 12977.10 | 0.00 | | 73770.12 | | | | | |
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| | | | | | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | • | 73770.12 | | | | | |
| 2) TOTALS This Period (last page this line number or | nly) | > | 73770.12 | | | | | |
| 3) TOTALS OUTSTANDING LOANS from Schedule | e C (last page only) | > | | | | | | |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | | | | | | | | |